

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000050169

**Entity Name:** GATEHOUSE PARTNERS LLC

**Current Principal Place of Business:**

4255 US HWY 1 S  
# 18 -173  
SAINT AUGUSTINE, FL 32086

**Current Mailing Address:**

4255 US HWY 1 S  
# 18 -173  
SAINT AUGUSTINE, FL 32086

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

KALLER, SOFIA  
4255 US HWY 1 S  
# 18 -173  
SAINT AUGUSTINE, FL 32086 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE: SOFIA KALLER**

**02/12/2024**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name KALLER, JEFFREY  
Address 4255 US HWY 1 S # 18 -173  
City-State-Zip: ST. AUGUSTINE FL 32086

Title MANAGER  
Name KALLER, SOFIA  
Address 4255 US HWY 1 S  
# 18 -173  
City-State-Zip: SAINT AUGUSTINE FL 32086

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: SOFIA KALLER**

**MANAGER**

**02/12/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date