

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000141692

Entity Name: WICKED ARCHERY, LLC

Current Principal Place of Business:

16597 88TH RD. NORTH
LOXAHATCHEE, FL 33470

Current Mailing Address:

16597 88TH RD. NORTH
LOXAHATCHEE, FL 33470

FEI Number: 85-1291520

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VELIX, MELISSA M
16597 88TH RD. NORTH
LOXAHATCHEE, FL 33470 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name MACLAREN, STUART R
Address 16597 88TH RD. NORTH
City-State-Zip: LOXAHATCHEE FL 33470

Title AUTHORIZED MEMBER
Name VELIX, WILLIAM R JR.
Address 16597 88TH RD. NORTH
City-State-Zip: LOXAHATCHEE FL 33470

Title AUTHORIZED MEMBER
Name VELIX, MELISSA M
Address 16597 88TH RD. NORTH
City-State-Zip: LOXAHATCHEE FL 33470

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: MELISSA VELIX

AMBR

04/10/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date