# 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000149750

Entity Name: THE CUENCA HEMP FARM LLC

#### **Current Principal Place of Business:**

4720 EMPIRE CHURCH RD. GROVELAND, FL 34736

### **Current Mailing Address:**

4720 EMPIRE CHURCH RD. GROVELAND, FL 34736 US

# FEI Number: 85-1370504

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

CUENCA, JOSE A 4720 EMPIRE CHURCH RD. GROVELAND, FL 34736 US FILED Apr 29, 2023 Secretary of State 9763020575CC

Date

Certificate of Status Desired: No

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

# Authorized Person(s) Detail :

| Title           | AMBR                   | Title           | AMBR                       |
|-----------------|------------------------|-----------------|----------------------------|
| Name            | CUENCA, JOSE A         | Name            | CUENCA, ABEL A SR.         |
| Address         | 4720 EMPIRE CHURCH RD. | Address         | 4720 EMPIRE CHURCH RD.     |
| City-State-Zip: | GROVELAND FL 34736     | City-State-Zip: | GROVELAND FL 34736         |
|                 |                        |                 |                            |
|                 |                        |                 |                            |
| Title           | AMBR                   | Title           | AMBR                       |
| Title<br>Name   | AMBR<br>SANTOS, LILIAN | Title<br>Name   | AMBR<br>CUENCA, ABEL A JR. |
|                 |                        |                 |                            |
| Name            | SANTOS, LILIAN         | Name            | CUENCA, ABEL A JR.         |

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: ABEL A CUENCA JR.

AMBR

Electronic Signature of Signing Authorized Person(s) Detail

Date