

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000272946

**Entity Name:** KUNST STUDIOS LLC

**Current Principal Place of Business:**

17096 GOLDCREST LOOP  
CLERMONT, FL 34714

**Current Mailing Address:**

17096 GOLDCREST LOOP  
CLERMONT, FL 34714 US

**FEI Number:** 85-3019587

**Certificate of Status Desired:** No

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

PFAB, ELISABETH A  
17096 GOLDCREST LOOP  
CLERMONT, FL 34714 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           | MGR                  | Title           | MGR                        |
| Name            | PFAB, ELISABETH A    | Name            | CISNEROS CABRERA, PATRICIA |
| Address         | 17096 GOLDCREST LOOP | Address         | 17096 GOLDCREST LOOP       |
| City-State-Zip: | CLERMONT FL 34714    | City-State-Zip: | CLERMONT FL 34714          |

*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:** ELISABETH PFAB

**REGISTERED AGENT**

**03/11/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date