

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000285548

**Entity Name:** OUTDOOR LIVING ALLIANCE, LLC

**Current Principal Place of Business:**

10428 W. STATE ROAD 84  
SUITE #6  
DAVIE, FL 33324

**Current Mailing Address:**

10428 W. STATE ROAD 84  
SUITE #6  
DAVIE, FL 33324 US

**FEI Number:** 85-4373947

**Certificate of Status Desired:** No

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

GRAY, CALVIN  
10428 W. STATE ROAD 84  
SUITE #6  
DAVIE, FL 33324 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  
Name GRAY, CALVIN W  
Address 10428 W. STATE ROAD 84  
SUITE #6  
City-State-Zip: DAVIE FL 33324

Title MGR  
Name DESJARDINS, DALE JR  
Address 10428 W. STATE ROAD 84  
SUITE #6  
City-State-Zip: DAVIE FL 33324

Title MGR  
Name VILLAMIL, AL  
Address 278 SEMORAN COMMERCE PLACE  
City-State-Zip: APOPKA FL 32703

Title MGR  
Name WOHLFORD, JOHN  
Address 317 FARMINGTON DR.  
City-State-Zip: PLANTATION FL 33317

*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:** AL VILLAMIL

MGR

04/27/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date