

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000006411

**Entity Name:** CITY DRIP LLC

**Current Principal Place of Business:**

6706 N NEBRASKA AVE  
#9414  
TAMPA, FL 33604

**Current Mailing Address:**

PO BOX 9414  
TAMPA, FL 33674 US

**FEI Number:** 86-2300714

**Certificate of Status Desired:** No

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

BUIE, FREDERICK J JR  
7305 HERITAGE HILLS DR  
APT A  
TAMPA, FL 33637 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 BUIE, FREDERICK J JR  
Address 1508 E. HUMPHREY ST APT A  
City-State-Zip: TAMPA FL 33604

*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:** FREDERICK BUIE

MGR

05/01/2024

\_\_\_\_\_

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_

Date