

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000051715

Entity Name: EXPENSE MASTERY LLC

Current Principal Place of Business:

886 SW PALM COVE DRIVE
PALM CITY, FL 34990

Current Mailing Address:

886 SW PALM COVE DRIVE
PALM CITY, FL 34990

FEI Number: 86-1720085

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4TH ST N
STE 300
ST. PETERSBURG, FL 33702 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 AMBR
Name MCGUIRE, TIM
Address 886 SW PALM COVE DRIVE
City-State-Zip: PALM CITY FL 34990

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: MCGUIRE, TIM

MANAGER

04/14/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date