

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000058226

**Entity Name:** VARIANCE EQUITY, LLC

**Current Principal Place of Business:**

720 SAINT JOHNS BLUFF ROAD N  
STE 2  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

720 SAINT JOHNS BLUFF ROAD N  
STE 2  
JACKSONVILLE, FL 32225 US

**FEI Number:** 86-2139495

**Certificate of Status Desired:** No

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

F.L. DEED, LLC  
720 SAINT JOHNS BLUFF ROAD N  
STE 2  
JACKSONVILLE, FL 32225 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 VARIANCE EQUITY MANAGEMENT TRUST  
Address 720 ST JOHNS BLUFF RD N STE 2  
City-State-Zip: JACKSONVILLE FL 32225

*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:** R L SINGLES

AR

04/30/2023

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

\_\_\_\_\_  
Date