#### 2025 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L21000245071

Entity Name: MICHAEL VALLE TRANSPORTATION LLC

Aug 01, 2025 **Secretary of State** 4656313897CR

**FILED** 

# **Current Principal Place of Business:**

3359 SOUTH ANATOLE WAY HOMOSASSA. FL 34448

# **Current Mailing Address:**

3359 SOUTH ANATOLE WAY HOMOSASSA. FL 34448 US

FEI Number: 87-0942367 Certificate of Status Desired: No

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

VALLE, MICHAEL 3359 SOUTH ANATOLE WAY HOMOSASSA, FL 34448 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: MICHAEL VALLE 08/01/2025

Electronic Signature of Registered Agent

Date

### Authorized Person(s) Detail:

Title **AMBR** 

Name VALLE, MICHAEL

Address 3359 SOUTH ANATOLE WAY

City-State-Zip: HOMOSASSA FL 34448

SIGNATURE: VALLE, MICHAEL

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.

**OWNER**