

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000410297

Entity Name: BANK-ASSIST OF FLORIDA, LLC

Current Principal Place of Business:

871 DARWIN RD
VENICE, FL 34923

Current Mailing Address:

PO BOX 1014
VENICE, FL 34284 US

FEI Number: 87-2838389

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEVINE, CATHLEEN M
871 DARWIN RD
VENICE, FL 34293 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 LEVINE, CATHLEEN M
Address 871 DARWIN RD
City-State-Zip: VENICE FL 34293

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: CATHLEEN LEVINE

AMBR

02/09/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date