

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000459539

Entity Name: 3075 JENNINGS LLC**Current Principal Place of Business:**1035 S STATE RD 7
311
WELLINGTON, FL 33414**Current Mailing Address:**1035 S STATE RD 7
311
WELLINGTON, FL 33414**FEI Number:** 87-3230622**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GARCIA, ANTHONY
1035 S STATE RD 7
311
WELLINGTON, FL 33414 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	GARCIA, ANTHONY
Address	1035 S STATE RD 7, SUITE 311
City-State-Zip:	WELLINGTON FL 33414

Title	MGR
Name	GARCIA, JEANNIE
Address	1035 S STATE RD 7, SUITE 311
City-State-Zip:	WELLINGTON FL 33414

Title	MGR
Name	TAMARGO, FRANCISCO J
Address	11903 SOUTHERN BLVD, SUITE 100
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	MGR
Name	TAMARGO, JESSICA M
Address	11903 SOUTHERN BLVD, SUITE 100
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	MGR
Name	TAMARGO, DANIEL J
Address	3175 S STATE RD 7, SUITE 200
City-State-Zip:	WELLINGTON FL 33414

Title	MGR
Name	TAMARGO, LISSETTE C
Address	3175 S STATE RD 7, SUITE 200
City-State-Zip:	WELLINGTON FL 33414

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: ANTHONY GARCIA**MANAGER****02/01/2023**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date