

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000483140

Entity Name: BROKEN ARROW, LLC

Current Principal Place of Business:

250 LAFITTE CRESCENT
FORT WALTON BEACH, FL 32547

Current Mailing Address:

250 LAFITTE CRESCENT
FORT WALTON BEACH, FL 32547

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARROWSMITH, STEPHEN
250 LAFITTE CRESCENT
FORT WALTON BEACH, FL 32547 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 ARROWSMITH, STEPHEN
Address 250 LAFITTE CRESCENT
City-State-Zip: FORT WALTON BEACH FL 32547

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: STEPHEN ARROWSMITH

MANAGER

04/30/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date