

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000509397

**Entity Name:** 117 OAK MAUPRIVEZ LLC

**Current Principal Place of Business:**

116 KIRKLAND STREET  
PALATKA, FL 32177

**Current Mailing Address:**

116 KIRKLAND STREET  
PALATKA, FL 32177 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

BACKER, KARINE  
116 KIRKLAND STREET  
PALATKA, FL 32177 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	Title	AP
Name	MAUPRIVEZ, BRUNO	Name	BACKER, KARINE
Address	116 KIRKLAND STREET	Address	116 KIRKLAND STREET
City-State-Zip:	PALATKA FL 32177	City-State-Zip:	PALATKA FL 32177

*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:** BRUNO MAUPRIVEZ

**OWNER**

**01/30/2023**

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

\_\_\_\_\_  
Date