

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000524517

**Entity Name:** 2749 PSL, LLC

**Current Principal Place of Business:**

2300 WESTON ROAD, SUITE 202  
WESTON, FL 33326

**Current Mailing Address:**

2300 WESTON ROAD, SUITE 202  
WESTON, FL 33326 US

**FEI Number:** 87-4797901

**Certificate of Status Desired:** No

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

ASSOCIATED CORPORATE SERVICES, LLC  
6111 BROKEN SOUND PARKWAY NW, SUITE 200  
BOCA RATON, FL 33487 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 JAMES CAPRIO  
Address 2300 WESTON ROAD, SUITE 202  
City-State-Zip: WESTON FL 33326

*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:** JAMES CAPRIO

MANAGER

02/08/2023

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

\_\_\_\_\_ Date