2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2025
Secretary of State
5116494891CC

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Entity Name: FALLSCREST LLC

Current Principal Place of Business:

3845 FALLSCREST CIRCLE
CLERMONT, FL 34711

Current Mailing Address:

4327 S. HIGHWAY 27
#423
CLERMONT, FL 34711

FEI Number: 87-4392622

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FARQUHARSON, SUNITA T
3845 FALLSCREST CIRCLE
CLERMONT, FL 34711 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	MANAGER
Name	FARQUHARSON, SUNITA
Address	3845 FALLSCREST CIRCLE
City-State-Zip:	CLERMONT FL

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: SUNITA FARQUHARSON MANAGER 04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date