

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000007850

**Entity Name:** THE OFF ICE LLC

**Current Principal Place of Business:**

125 E. INDIANA AVE  
SUITE B  
DELAND, FL 32724

**FILED**  
**Apr 29, 2024**  
**Secretary of State**  
**9301039329CC**

**Current Mailing Address:**

125 E. INDIANA AVE  
SUITE B  
DELAND, FL 32724

**FEI Number: 88-1367077**

**Certificate of Status Desired: No**

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

ROBERT R. BRYANT, CPA, PLLC  
10941 SE US HWY 441  
BELLEVIEW, FL 34420 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            AMBR  
Name            BENSON, KIMBERLY  
Address        125 E. INDIANA AVE  
                  SUITE B  
City-State-Zip: DELAND FL 32724

*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: BENSON , KIMBERLY**

**AMBR**

**04/29/2024**

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

\_\_\_\_\_ Date