

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000116057

**Entity Name:** DIOCLETIAN, LLC

**Current Principal Place of Business:**

2619 BAYSHORE BLVD. #1500  
TAMPA, FL 33629

**Current Mailing Address:**

2619 BAYSHORE BLVD. #1500  
TAMPA, FL 33629 US

**FEI Number:** 88-2375334

**Certificate of Status Desired:** No

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

HENDEE,MCKERNAN,SCHROEDER,WILKERSON&HENDEE  
1700 SOUTH MACDILL AVE., STE. 200  
TAMPA, FL 33629 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 HENNECKE, DEREK  
Address 2619 BAYSHORE BLVD. #1500  
City-State-Zip: TAMPA FL 33629

*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:** DEREK G HENNECKE

MGR

04/16/2024

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

\_\_\_\_\_ Date