## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000405804

Entity Name: RECHARGE MOBILE LLC

**Current Principal Place of Business:** 

47 SW 17TH STREET RECHARGE CLINIC, SUITE A OCALA, FL 34471

## **Current Mailing Address:**

47 SW 17TH STREET RECHARGE CLINIC, SUITE A OCALA, FL 34471 UN

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TIECHE, CYNTHIA L 2165 SW 80TH STREET OCALA, FL 34476 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

FILED Apr 13, 2025

**Secretary of State** 

2341149619CC

Authorized Person(s) Detail:

Title MGR Title MGR

 Name
 TIECHE, STEVE C
 Name
 TIECHE, CYNTHIA L

 Address
 2165 SW 80TH STREET
 Address
 2165 SW 80TH ST

 City-State-Zip:
 OCALA FL 34476
 City-State-Zip:
 OCALA FL 34476

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.