

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000409432

**Entity Name:** BURDS NESTING LLC

**Current Principal Place of Business:**

1982 STATE ROAD 44  
#174  
NEW SMYRNA BEACH, FL 32168

**Current Mailing Address:**

1982 STATE ROAD 44  
#174  
NEW SMYRNA BEACH, FL 32168 US

**FEI Number:** 92-0415893

**Certificate of Status Desired:** Yes

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

LEGALINC CORPORATE SERVICES INC.  
476 RIVERSIDE AVE  
JACKSONVILLE, FL 32202 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	Title	AMBR
Name	BURD, KEVIN	Name	BURD, ASHLEY
Address	1595 DELPHI WAY	Address	1595 DELPHI WAY
City-State-Zip:	NEW SMYRNA BEACH FL 32168	City-State-Zip:	NEW SMYRNA BEACH FL 32168

*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:** ASHLEY BURD

**OWNER**

**04/27/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date