

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000423787

**Entity Name:** PESCFLLC

**Current Principal Place of Business:**

3340 GRAY FOX COVE  
APOPKA, FL 32703

**Current Mailing Address:**

3340 GRAY FOX CV  
APOPKA, FL 32703 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

SILVA, KENNY E  
3340 GRAY FOX CV  
APOPKA, FL 32703 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	MGR
Name	SILVA, KENNY E	Name	SILVA, KENLY S
Address	3340 GRAY FOX CV	Address	12540 SPLENDID PL APT 6401
City-State-Zip:	APOPKA FL 32703	City-State-Zip:	ORLANDO FL 32821

*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:** KENNY SILVA

**TITLE** AMBR

**04/24/2023**

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

\_\_\_\_\_  
Date