

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000469721

**Entity Name:** 1295 REIMAGINED, LLC

**Current Principal Place of Business:**

1295 SOUTH ORLANDO AVENUE  
MAITLAND, FL 32751

**Current Mailing Address:**

1295 SOUTH ORLANDO AVENUE  
MAITLAND, FL 32751

**FEI Number:** 92-1166699

**Certificate of Status Desired:** Yes

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

CIOCCA, CHRIS  
1295 SOUTH ORLANDO AVENUE  
MAITLAND, FL 32751 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	Title	MGR
Name	SHEAFFER, ASHLEY R	Name	VELLEQUETTE, ADAM
Address	1295 SOUTH ORLANDO AVENUE	Address	1295 SOUTH ORLANDO AVENUE
City-State-Zip:	MAITLAND FL 32751	City-State-Zip:	MAITLAND FL 32751

*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 SHEAFFER

**PRINCIPAL**

**03/09/2023**

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

\_\_\_\_\_  
Date