

2025 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L23000201952

Entity Name: 25 PARSONAGE LLC

Current Principal Place of Business:

1317 EDGEWATER DR STE #1705
ORLANDO, FL 32804

Current Mailing Address:

1317 EDGEWATER DR STE #1705
ORLANDO, FL 32804 US

FEI Number: 99-1731324

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: NICHOLAS P. HOPECK

07/11/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name RING SAVVY INC.
Address 1317 EDGEWATER DR STE #1705
City-State-Zip: ORLANDO FL 32804

Title AMBR
Name THE BLACKWATER JUNSTION
FAMILY TRUST
Address 1317 EDGEWATER DR STE #1705
City-State-Zip: ORLANDO FL 32804

Title AMBR
Name THE WHITEWATER JUNCTION
FAMILY TRUST
Address 1317 EDGEWATER DR STE #1705
City-State-Zip: ORLANDO FL 32804

Title MGR
Name SHATLES, ROBERT
Address 258 CHRISTIAN AVE
City-State-Zip: STONY BROOK NY 11790

Title MGR
Name SHATLES, BROOKE
Address 258 CHRISTIAN AVE
City-State-Zip: STONY BROOK NY 11790

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: BROOKE SHATLES

MANAGER

07/11/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date