

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000351233

Entity Name: CV F2 LLC

Current Principal Place of Business:

1400 GULF SHORE BLVD N.
APT 207
NAPLES, FL 34102

Current Mailing Address:

1400 GULF SHORE BLVD N.
APT 207
NAPLES, FL 34102

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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
Name SANDOR, LOGAN
Address 1400 GULF SHORE BLVD N., APT 207
City-State-Zip: NAPLES FL 34102

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: LOGAN SANDOR

MANAGER

03/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date