

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000545757

Entity Name: 3439 GAVESON CT 2023, LLC

Current Principal Place of Business:

3439 GAVESON CT
PORT ORANGE, FL 32129

Current Mailing Address:

6499 JUSTIN CT.
PORT ORANGE, FL 32128

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GENDRON, MATTHEW
6499 JUSTIN CT
PORT ORANGE, FL 32128 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 MOORE, ANGELA
Address 6499 JUSTIN CT
City-State-Zip: PORT ORANGE FL 32128

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: ANGELA MOORE

MGR

03/05/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date