

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000016850

**Entity Name:** PEOPLESUITE OPS, LLC

**Current Principal Place of Business:**

1532 SANTIAGO CIR  
NAPLES, FL 34113

**Current Mailing Address:**

PO BOX 1539  
MOORESVILLE, NC 28115 US

**FEI Number: 86-2683278**

**Certificate of Status Desired: No**

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

ERICKSON, ELAINE  
1532 SANTIAGO CIR  
NAPLES, FL 34113 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 PRESTON, DAVID  
Address 222 MAIN ST  
City-State-Zip: MOORESVILLE NC 28115

Title AP  
Name COLLINS, MICHELLE  
Address 222 MAIN ST  
City-State-Zip: MOORESVILLE NC 28115

*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: MICHELLE COLLINS**

**FINANCE MANAGER**

**01/03/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date