

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000367147

**Entity Name:** ROMA PM, LLC

**Current Principal Place of Business:**

3401 SE 15TH PLACE  
CAPE CORAL, FL 33904

**Current Mailing Address:**

3401 SE 15TH PLACE  
SUITE A  
CAPE CORAL, FL 33904 US

**FEI Number:** 85-4139614

**Certificate of Status Desired:** No

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

RODRIGUEZ, OMAR  
1110 SE 20TH STREET  
CAPE CORAL, FL 33990 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	RODRIGUEZ, OMAR	Name	MAYNE, DONALD W
Address	1110 SE 20TH STREET	Address	1224 SW 8TH PLACE
City-State-Zip:	CAPE CORAL FL 33991	City-State-Zip:	CAPE CORAL FL 33990

*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:** OMAR RODRIGUEZ

**MANAGER**

**02/06/2023**

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

\_\_\_\_\_  
Date