

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000227267

**Entity Name:** ELEVATENWF30A, LLC

**Current Principal Place of Business:**

411 LOST TRAIL DRIVE,  
HENDERSON, NV 89014

**Current Mailing Address:**

411 LOST TRAIL DRIVE,  
HENDERSON, NV 89014 US

**FEI Number:** 88-2512096

**Certificate of Status Desired:** Yes

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

DARREN PAUL KOENENN JR.  
15 VALDARE LANE,  
INLET BEACH, FL 32461 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 DARREN PAUL KOENENN JR.  
Address 15 VALDARE LANE,  
City-State-Zip: INLET BEACH FL 32461

*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:** DARREN PAUL KOENENN JR.

**REGISTERED AGENT**

**04/01/2023**

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

\_\_\_\_\_ Date