

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000495478

Entity Name: 2 WHISPERING PINES LLC

Current Principal Place of Business:

2 WHISPERING PINES TRAIL
ORMOND BEACH, FL 32174

Current Mailing Address:

3 ASHER DR.
SPRING VALLEY, NY 10977 US

FEI Number: 92-1119995

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SPREI, YECHIEL
2 WHISPERING PINES TRAIL
ORMOND BEACH, FL 32174 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 AMBR
Name YECHIEL SPREI
Address 3 ASHER DR.
City-State-Zip: SPRING VALLEY NY 10977

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: YECHIEL SPREI

OWNER

04/27/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date