

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000200007

**Entity Name:** LINDA'S FASHIONS CUSTOM DRESSMAKING, LLC**Current Principal Place of Business:**214 NE 164TH STREET  
MIAMI, FL 33162**Current Mailing Address:**214 NE 164TH STREET  
MIAMI, FL 33162 US**FEI Number: 81-1605628****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DALRYMPLE, LINDA M  
214 NE 164TH STREET  
MIAMI, FL 33162 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:** LINDA DALRYMPLE

03/12/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title OWNER  
Name DALRYMPLE, LINDA  
Address 214 NE 164TH STREET  
City-State-Zip: MIAMI FL 33162

Title ASST MANAGER  
Name GREGORY, SPENCE  
Address 214 NE 164TH STREET  
City-State-Zip: MIAMI FL 33162

Title AUTHORIZED REPRESENTATIVE  
Name LINDA, DALRYMPLE  
Address 214 NE 164TH STREET  
City-State-Zip: NORTH MIAMI BCH FL 33162

Title VP  
Name SPENCE, CHRISTOPHER G  
Address 214 NE 164 ST  
City-State-Zip: MIAMI FL 33162

Title SECRETARY  
Name MCCOOK, APRIL  
Address 214 NE 164TH STREET  
City-State-Zip: MIAMI FL 33162

*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:** LINDA DALRYMPLE

MANAGER

03/12/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date