

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000050686

**Entity Name:** AT YOUR DESIGNS, LLC

**Current Principal Place of Business:**

4424 NORTH ALATAMAHA STREET  
SAINT AUGUSTINE, FL 32092

**Current Mailing Address:**

4424 NORTH ALATAMAHA STREET  
SAINT AUGUSTINE, FL 32092 US

**FEI Number:** 81-1887169

**Certificate of Status Desired:** Yes

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

SPIKER, JASON A  
4424 NORTH ALATAMAHA STREET  
SAINT AUGUSTINE, FL 32092 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:** JASON A SPIKER

02/09/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AMBR	Title	AUTHORIZED REPRESENTATIVE
Name	SPIKER, JASON A	Name	SPIKER, CHRISTINE E
Address	4424 NORTH ALATAMAHA STREET	Address	4424 NORTH ALATAMAHA STREET
City-State-Zip:	SAINT AUGUSTINE FL 32092	City-State-Zip:	SAINT AUGUSTINE FL 32092

*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:** CHRISTINE SPIKER

**AUTHORIZED  
REPRESENTATIVE**

02/09/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date