| NTA ROSA BEACH, FL 32459-0017 US   |   |
|--|---|
| Number: 27-2998427   | Certificate of Status Desired   |
| ne and Address of Current Registered Agent:                                    |   |
| F, MARCUS A ESQ.<br>COMMENDENCIA STREET<br>ISACOLA, FL 32502 US                |   |
| above named entity submits this statement for the purpose of changing its regi | istered office or registered agent, or both, in the State of Florida. |
| NATURE: MARCUS A. HUFF, ESQ.   | 04  |

#### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000012057

Entity Name: REDSEARCH GROUP, LLC

### **Current Principal Place of Business:**

605 N. COUNTY HIGHWAY 393, STE A2 SANTA ROSA BEACH FL 32459-0017

### **Current Mailing Address:**

605 N. COUNTY HIGHWAY 393, STE A2 SAN

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#### Nam

HUFF 501 C PENS

| SIGNATURE                     | : MARCUS A. HUFF, ESQ.                   |                 |                       | 04/09/2024 |  |
|-------------------------------|--|-----------------|-----------------------|------------|--|
|                               | Electronic Signature of Registered Agent |                 |                       | Date       |  |
| Authorized Person(s) Detail : |  |                 |                       |            |  |
| Title                         | MGR                                      | Title           | MGR                   |            |  |
| Name                          | PETERSON, DEBRA L                        | Name            | PETERSON, CLAYTON     |            |  |
| Address                       | 3952 BAYTOWNE AVE. NORTH                 | Address         | 4308 STONEBRIDGE ROAD |            |  |
| City-State-Zip:               | MIRAMAR BEACH FL 32550                   | City-State-Zip: | DESTIN FL 32541       |            |  |

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: DEBRA L. PETERSON

MGR

04/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Apr 09, 2024 Secretary of State 1535228208CC

d: No