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. 02/14/2024

SIGNATURE: AMY MILLS	AMBR	

Electronic Signature of Signing Authorized Person(s) Detail

Name and Address of Current Registered Agent:

MILLS, AMY 1348 NE BROWNVILLE ST. ARCADIA, FL 34266 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:	AMY MILLS			02/14/2024
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AMBR	Title	AMBR	
Name	MILLS, AMY	Name	MILLS, DAVID	
Address	1348 NE BROWNVILLE ST	Address	1348 NE BROWNVILLE ST.	
City-State-Zip:	ARCADIA FL 34266	City-State-Zip:	ARCADIA FL 34266	

ARCADIA, FL 34266

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L17000128926

Entity Name: SEMINOLE WIND AIRBOAT TOURS LLC

Current Principal Place of Business:

1348 NE BROWNVILLE ST.

Current Mailing Address:

1348 NE BROWNVILLE ST. ARCADIA, FL 34266 US

FEI Number: 82-1911232

Certificate of Status Desired: No

Feb 14, 2024 Secretary of State 7184997332CC

FILED

Date