

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000227293

Entity Name: DOUBLEWORDPLAY LLC

Current Principal Place of Business:

DOUBLEWORDPLAY
PO BOX 5079
CHARLOTTE, NC 28299

FILED
Feb 09, 2024
Secretary of State
1339134401CC

Current Mailing Address:

DOUBLEWORDPLAY
PO BOX 5079
CHARLOTTE, NC 28299 US

FEI Number: 83-2036528

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202 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 MAMMADOV, SAMIR
Address DOUBLEWORDPLAY
 PO BOX 5079
City-State-Zip: CHARLOTTE NC 28299

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: SAMIR MAMMADOV

AMBR

02/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date