# 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.

PRINCIPAL

SIGNATURE: LAUREL ARENDELL

Electronic Signature of Signing Authorized Person(s) Detail

304 BRAIR CLIFF CT SEBASTIAN, FL 32958 US

**Current Principal Place of Business:** 

## FEI Number: 83-2236836

**Current Mailing Address:** 

DOCUMENT# L18000238822

304 BRIAR CLIFF CIRCLE SEBASTIAN, FL 32958

### Name and Address of Current Registered Agent:

Entity Name: INLET MARKETING & DESIGN GROUP LLC

ARENDELL, LAUREL 304 BRAIR CLIFF CR SEBASTIAN, FL 32958 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

## Authorized Person(s) Detail :

Title	AR	Title	AUTHORIZED REPRESENTATIVE
Name	ARENDELL, LAUREL	Name	ARENDELL, GRIFFIN C
Address	304 BRIARCLIFF CR	Address	9801 FLEMING GRANT ROAD
City-State-Zip:	SEBASTIAN FL 32958	City-State-Zip:	MICCO FL 32976

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Certificate of Status Desired: No

Date

Date

04/28/2024

FILED Apr 28, 2024 Secretary of State 7119377168CC