

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000051020

Entity Name: SABAL SIGNUP LLC

Current Principal Place of Business:

5900 HIATUS ROAD
TAMARAC, FL 33321

Current Mailing Address:

5900 HIATUS ROAD
TAMARAC, FL 33321 US

FEI Number: APPLIED FOR

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LECOMPTE, GRANVILLE
5900 HIATUS ROAD
TAMARAC, FL 33321 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	MGR	Title	AUTHORIZED REPRESENTATIVE
Name	LECOMPTE, GRANVILLE	Name	KEYES COVERAGE LLC
Address	5900 HIATUS ROAD	Address	5900 HIATUS ROAD
City-State-Zip:	TAMARAC FL 33321	City-State-Zip:	TAMARAC FL 33321

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: KEYES COVERAGE LLC

OWNER

03/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date