

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000076741

**Entity Name:** MOLLY SEWELL LLC

**Current Principal Place of Business:**

15824 ITALIAN CYPRESS WAY  
WELLINGTON, FL 33414

**Current Mailing Address:**

15824 ITALIAN CYPRESS WAY  
WELLINGTON, FL 33414 US

**FEI Number:** 83-4023105

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SEWELL, MOLLY  
913 OSCEOLA AVE  
WINTER PARK, FL 32789 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  
Name SEWELL, MOLLY  
Address 15824 ITALIAN CYPRESS WAY  
City-State-Zip: WELLINGTON FL 33314

*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:** MOLLY SEWELL

MGR

02/29/2024

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date