

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000129801

**Entity Name:** DIGNITY CARDS LLC**Current Principal Place of Business:**1649 SW DAY STREET  
PORT SAINT LUCIE, FL 34953**Current Mailing Address:**1649 SW DAY STREET  
PORT SAINT LUCIE, FL 34953 US**FEI Number:** 84-1741730**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLAKE, CHRISTOPHER  
1649 SW DAY STREET  
PORT SAINT LUCIE, FL 34953 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	AUTHORIZED MEMBER
Name	BLAKE, CHRISTOPHER
Address	1649 SW DAY STREET
City-State-Zip:	PORT SAINT LUCIE FL 34953

Title	AUTHORIZED MEMBER
Name	KESARIS, SAMUEL
Address	6815 SW SILVER WOLF DR
City-State-Zip:	PALM CITY FL 34990

Title	AUTHORIZED MEMBER
Name	SWISHER, JONATHAN
Address	1448 NE 57TH PLACE
City-State-Zip:	FORT LAUDERDALE FL 33334

*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:** CHRISTOPHER BLAKE

AMBR

01/24/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date