

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000240990

**Entity Name:** SFL CARDS UNLIMITED LLC

**Current Principal Place of Business:**

6013 LAS COLINAS CIR  
LAKE WORTH, FL 33463

**Current Mailing Address:**

PO BOX 541963  
LAKE WORTH, FL 33454 US

**FEI Number:** 84-3292178

**Certificate of Status Desired:** No

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

WHEATON, CHRISTOPHER D  
6013 LAS COLINAS CIR  
LAKE WORTH, FL 33463 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 WHEATON, CHRISTOPHER D  
Address 6013 LAS COLINAS CIR  
City-State-Zip: LAKE WORTH FL 33463

Title MGR  
Name WHEATON, PATRICIA  
Address 6013 LAS COLINAS CIR  
City-State-Zip: LAKE WORTH FL 33463

*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 WHEATON

MGR

02/15/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date