## **2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000191629

Entity Name: SYGNATURE LIFESTYLE, LLC.

**Current Principal Place of Business:** 

6188 LAUREL LANE APT. C

TAMARAC, FL 33319

**Current Mailing Address:** 

6188 LAUREL LANE APT. C

TAMARAC, FL 33319

FEI Number: 85-2032442 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LINDSAY, MARCIA A 6188 LAUREL LANE APT. C TAMARAC, FL 33319 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

FILED Apr 09, 2023

**Secretary of State** 

8052261367CC

Authorized Person(s) Detail:

Title AMBR Title AMBR

NameLINDSAY, MARCIA ANameLINDSAY, NATHANIEL RAddress6188 LAUREL LANE, APT.CAddress6188 LAUREL LANE, APT.C

City-State-Zip: TAMARAC FL 33319 City-State-Zip: TAMARAC FL 33319

Title AMBR

Name LINDSAY, SYMONE A
Address 6188 LAUREL LANE, APT.C

City-State-Zip: TAMARAC FL 33319

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: SYMONE LINDSAY

Electronic Signature of Signing Authorized Person(s) Detail

04/09/2023

Date