

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000223074

**Entity Name:** 1NEGLAKAY LLC

**Current Principal Place of Business:**

3049 CLEVELAND AVE 275  
FORT MYERS, FL 33901

**Current Mailing Address:**

3049 CLEVELAND AVE 275  
FORT MYERS, FL 33901 UN

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

THOBY, MADELIN  
3049 CLEVELAND AVE 275  
FORT MYERS, FL 33901 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 AMBR  
Name THOBY, MADELIN  
Address 3049 CLEVELAND AVE 275  
City-State-Zip: FORT MYERS FL 33901

Title MGR  
Name WESLEY, SAMEDI  
Address 23 INDEPENDENCE DR. 3  
City-State-Zip: METHUEN MA 01844

*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:** MADELIN THOBY

MBR

02/09/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date