

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000086669

**Entity Name:** SY DIRECT, LLC

**Current Principal Place of Business:**

5405 W IRLO BRONSON MEM HWY  
KISSIMMEE, FL 34746

**Current Mailing Address:**

5558 JESSAMINE LN  
ORLANDO, FL 32839 US

**FEI Number:** 86-2382336

**Certificate of Status Desired:** No

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

DICKENS WEALTH MANAGEMENT LLC  
7320 E FLETCHER AVE  
TAMPA, FL 33637 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 SHARICK CAROLAINE MATEUS  
BACCA  
Address 5558 JESSAMINE LN  
City-State-Zip: ORLANDO FL 32839

Title MGR  
Name BRADLEY YOUNG  
Address 5558 JESSAMINE LN  
City-State-Zip: ORLANDO FL 32839

Title MGR  
Name BACCA, ANGELICA J  
Address 3960 SOUTHPOINTE DR  
APT 529  
City-State-Zip: ORLANDO FL 32822

Title MGR  
Name GUTIERREZ, WILLIAM A  
Address 3960 SOUTHPOINTE DR  
APT 529  
City-State-Zip: ORLANDO FL 32822

*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:** WILLIAM GUTIERREZ

**MGR**

**04/25/2024**

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

\_\_\_\_\_  
Date