

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000182194

**Entity Name:** SIGNATURE MULTISERVICES LLC

**Current Principal Place of Business:**

14691 EDNA WAY  
DELRAY BEACH, FL 33484

**Current Mailing Address:**

14691 EDNA WAY  
DELRAY BEACH, FL 33484 US

**FEI Number: 86-3534400**

**Certificate of Status Desired: No**

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

LOVINSKY, SUZIE  
14691 EDNA WAY  
DELRAY BEACH, FL 33484 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            LOVINSKY, SUZIE  
Address        14691 EDNA WAY  
City-State-Zip: DELRAY BEACH FL 33484

*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: SUZIE LOVINSKY**

**MEMBER**

**05/01/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date