

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000011704

**Entity Name:** SPYGLASS 170, LLC

**Current Principal Place of Business:**

411 PARK AVE STE 3  
BOCA GRANDE, FL 33921

**Current Mailing Address:**

9800 CONNECTICUT DR STE A1-100  
CROWN POINT, IN 46307 US

**FEI Number:** 87-4476935

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD  
PLANTATION, FL 33324 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	Title	AP P
Name	WMB CORP/	Name	MELVIN, ADRIENE
Address	9800 CONNECTICUT DR STE A1-100	Address	411 PARK AVE STE 3
City-State-Zip:	CROWN POINT IN 46307	City-State-Zip:	BOCA GRANDE FL 33921

*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:** JASON WEISLER

**SECRETARY OF  
MANAGER**

01/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date