

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000059180

**Entity Name:** 6481 ARAGON #304, LLC

**Current Principal Place of Business:**

1670 LLEWELLYN DR  
FT MYERS, FL 33901

**Current Mailing Address:**

1670 LLEWELLYN DR  
FT MYERS, FL 33901 US

**FEI Number:** 88-0811848

**Certificate of Status Desired:** No

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

DLF REGISTERED AGENT SERVICE, LLC  
101811 SIX MILE CYPRESS PKWY STE C  
FT MYERS, FL 33966 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 SCOGGINS, JASON T  
Address 12601 MASTIQUE BEACH BLVD APT  
501  
City-State-Zip: FT MYERS FL 33908

Title AMBR  
Name SCOGGINS, ELIZABETH D  
Address 1670 LLEWELLYN DR  
City-State-Zip: FORT MYERS FL 33901

*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:** SCOGGINS , JASON T

AMBR

02/13/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date