

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000064091

**Entity Name:** ST. MAARTEN LLC

**Current Principal Place of Business:**

495 TOWN PLAZA AVE  
PONTE VEDRA, FL 32081

**Current Mailing Address:**

495 TOWN PLAZA AVE  
PONTE VEDRA, FL 32081

**FEI Number:** 88-0530026

**Certificate of Status Desired:** No

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

SUNSHINE CORPORATE FILINGS LLC  
7901 4TH ST N  
300  
ST. PETERSBURG, FL 33702 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 PLYAM, NATALIA  
Address 216 SETTLERS ROW N  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title AP  
Name SCOTT, ROGER  
Address 216 SETTLERS ROW N  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title AP  
Name BUSBY, MORGAN  
Address 495 TOWN PLAZA AVE  
City-State-Zip: PONTE VEDRA FL 32081

*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:** NATALIA PLYAM

**MEMBER**

**02/07/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date