## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000075282

Entity Name: SEGURIDAD INTEGRAL LLC

**Current Principal Place of Business:** 

3801 AVALON PARK E BLVD FL2 STE217 ORLANDO, FL 32828

## **Current Mailing Address:**

3801 AVALON PARK E BLVD FL2 STE217 ORLANDO, FL 32828 US

FEI Number: 88-0840485 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SYSTEM FAILURE LLC 5237 SUMMERLIN COMMONS BLVD SUITE 400 FORT MYERS, FL 33907 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

FILED Apr 25, 2023

**Secretary of State** 

5673426686CC

## Authorized Person(s) Detail:

Title MGR

Name SYSTEM FAILURE INC
Address 600 N BROAD ST STE 5
City-State-Zip: MIDDLETOWN DE 19709

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.