

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000139886

**Entity Name:** AARON LITZ PHOTOGRAPHY LLC

**Current Principal Place of Business:**

224 W WINTER PARK ST  
ORLANDO, FL 32804

**Current Mailing Address:**

224 W WINTER PARK ST  
ORLANDO, FL 32804 US

**FEI Number:** 88-1609777

**Certificate of Status Desired:** No

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

LITZ, AARON C  
224 W WINTER PARK ST  
ORLANDO, FL 32804 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 AR  
Name LITZ, AARON C  
Address 224 W WINTER PARK ST  
City-State-Zip: ORLANDO FL 32804

*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:** AARON LITZ

AR

02/10/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date