

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000237363

**Entity Name:** SIGNATURE SEVEN LLC

**Current Principal Place of Business:**

5036 DR PHILLIPS BLVD  
#1078  
ORLANDO, FL 32819

**Current Mailing Address:**

939 CHARLES ST  
ORLANDO, FL 32808 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

JEFFERS, MONE  
5036 DR PHILLIPS BLVD  
#1078  
ORLANDO, FL 32819 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 P  
Name DONASTORG, MIKA  
Address 5036 DR PHILLIPS BLVD #1078  
City-State-Zip: ORLANDO FL 32819

Title AP  
Name JEFFERS, MONE  
Address 5036 DR PHILLIPS BLVD #1078  
City-State-Zip: ORLANDO FL 32819

Title AMBR  
Name HODGE, DESTINY  
Address 5036 DR PHILLIPS BLVD #1078  
City-State-Zip: ORLANDO FL 32819

*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:** MIKA DONASTORG

P

04/26/2023

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

\_\_\_\_\_  
Date