

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000412035

**Entity Name:** LABELS BY LYNN LLC

**Current Principal Place of Business:**

1576 BELLA CRUZ DRIVE  
SUITE 333  
THE VILLAGES, FL 32159

**Current Mailing Address:**

1576 BELLA CRUZ DRIVE  
SUITE 333  
THE VILLAGES, FL 32159 US

**FEI Number:** 92-0458237

**Certificate of Status Desired:** No

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

SOLUTIONS GROUP ACCOUNTING FIRM INC  
1275 LAKE HEATHROW LN  
LAKE MARY, FL 32746 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            POWELL, HOPE  
Address        1404 N RONALD REGAN BLVD  
City-State-Zip: LONGWOOD FL 32750

Title            AMBR  
Name            POWELL, DUANE  
Address        202 HANGING MOSS LN  
City-State-Zip: LADY LAKE FL 32159

*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:** DUANE POWELL

AMBR

02/05/2024

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

\_\_\_\_\_  
Date