

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000188913

**Entity Name:** SARAH ANDREWS LLC

**Current Principal Place of Business:**

822 EL PRADO  
WEST PALM BEACH, FL 33405

**Current Mailing Address:**

822 EL PRADO  
WEST PALM BEACH, FL 33405 UN

**FEI Number:** 92-3539863

**Certificate of Status Desired:** No

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

ANDREWS, SARAH K  
822 EL PRADO  
WEST PALM BEACH, FL 33405 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 CO-OWNER  
Name DAGRESS, SOLANGE DR.  
Address 822 EL PRADO  
City-State-Zip: WEST PALM BEACH 33405

*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:** SOLANGE DAGRESS

**OWNER**

**01/27/2024**

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

\_\_\_\_\_  
Date