

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000405768

**Entity Name:** LIQUIDATED MERCHANDISE, LLC

**Current Principal Place of Business:**

8114 TROPICAL KINGBIRD ST  
WINTER GARDEN, FL 32787

**Current Mailing Address:**

8114 TROPICAL KINGBIRD ST  
WINTER GARDEN, FL 32787 US

**FEI Number:** 93-3264678

**Certificate of Status Desired:** No

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

GAUD, ESTHER  
780 MARSHALL LAKE RD  
APOPKA, FL 32703 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 GAUD, OMAR G  
Address 780 MARSHALL LAKE RD  
City-State-Zip: APOPKA FL 32703

Title AMBR  
Name GAUD, ESTHER M  
Address 780 MARSHALL LAKE RD  
City-State-Zip: APOPKA FL 32703

*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:** OMAR G GAUD

**MEMBER MANAGER**

**04/10/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date