#### that my name appears above, or on an attachment with all other like empowered. SIGNATURE: MARLYN TISDALE MEMBER

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

Electronic Signature of Signing Authorized Person(s) Detail

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000466580

Entity Name: SATIZFACTION GOODS LLC

### **Current Principal Place of Business:**

3623 WHISPER CREEK BLVD MIDDLEBURG, FL 32068

## **Current Mailing Address:**

25 EAST BEAVER STREET **UNIT 131** JACKSONVILLE, FL 32202 US

# FEI Number: 93-3901062

## Name and Address of Current Registered Agent:

ZENBUSINESS INC. 336 E. COLLEGE AVE. SUITE 301 TALLAHASSEE, FL 32301 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

## Authorized Person(s) Detail :

Title	AMBR	Title	MANAGER
Name	TISDALE, MARLYN	Name	TISDALE, MARLYN
Address	25 EAST BEAVER STREET, UNIT 131	Address	3623 WHISPER CREEK BLVD
City-State-Zip:	JACKSONVILLE FL 32202	City-State-Zip:	MIDDLEBURG FL 32068

FILED Mar 19, 2024 Secretary of State 0869716174CC

Certificate of Status Desired: No

Date

03/19/2024 Date