

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000474347

**Entity Name:** ANCHOR LEGAL SOLUTIONS, LLC.

**Current Principal Place of Business:**

2833 LAFAYETTE TRACE DR  
SAINT CLOUD, FL 34772

**Current Mailing Address:**

2833 LAFAYETTE TRACE DR  
SAINT CLOUD, FL 34772

**FEI Number:** 99-1781300

**Certificate of Status Desired:** No

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

MEDINA, MAGALI  
2833 LAFAYETTE TRACE DRIVE  
SAINT CLOUD, FL 34772 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	AP	Title	AP
Name	MEDINA, MAGALI	Name	MEDINA, PABLO A
Address	2833 LAFAYETTE TRACE DR	Address	2833 LAFAYETTE TRACE DRIVE
City-State-Zip:	SAINT CLOUD FL 34772	City-State-Zip:	SAINT CLOUD FL 34772

*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:** MAGALI MEDINA

**OWNER**

**03/08/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date