## **2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000004109

Entity Name: TOOLE DESIGN GROUP, LLC

**Current Principal Place of Business:** 

8484 GEORGIA AVE STE 800 SILVER SPRING, MD 20910

**Current Mailing Address:** 

8484 GEORGIA AVE, SUITE 800 SILVER SPRING. MD 20910 US

FEI Number: 05-0545429 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 7901 4TH ST N SUITE 300 ST. PETERSBURG, FL 33702 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:

Title

Electronic Signature of Registered Agent

Date

**FILED** Mar 05, 2023

**Secretary of State** 

8456257410CC

Authorized Person(s) Detail:

**MEMBER** 

Title **MEMBER** Title **MEMBER** 

Name TOOLE, JENNIFER Name JACKSON, NICK

Address 8484 GEORGIA AVE STE 800 Address 8484 GEORGIA AVE STE 800 SILVER SPRING MD 20910 City-State-Zip: City-State-Zip: SILVER SPRING MD 20910

Title **MEMBER** Title **MEMBER** 

Name SCHULTHEISS, WILLIAM Name ELDRIDGE, RJ Address 8484 GEORGIA AVE STE 800 Address 8484 GEORGIA AVE STE 800

SILVER SPRING MD 20910 City-State-Zip: SILVER SPRING MD 20910 City-State-Zip:

Title **MEMBER** Title **MEMBER** 

Name SCHLICHTING, CIARA Name BOUGHMAN, ERNIE

8484 GEORGIA AVE STE 800 Address Address 8484 GEORGIA AVE STE 800 City-State-Zip: SILVER SPRING MD 20910 City-State-Zip: SILVER SPRING MD 20910

Title **MEMBER** 

Name ANDERSON, ALIA Name FIELDS, JESSICA

Address 8484 GEORGIA AVE STE 800 Address 8484 GEORGIA AVE STE 800 SILVER SPRING MD 20910 City-State-Zip: SILVER SPRING MD 20910 City-State-Zip:

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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.

03/05/2023 SIGNATURE: RJ ELDRIDGE **MEMBER** 

## **Authorized Person(s) Detail Continued:**

Title MEMBER

Name DEGRAY, JASON

Address 8484 GEORGIA AVE STE 800
City-State-Zip: SILVER SPRING MD 20910