that my name appears above, or on an attachment with all other like empowered. SIGNATURE: CONSTANCE DEAN

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L10000069875

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: 5791 YOUNGQUIST, LLC

Current Principal Place of Business:

12734 KENWOOD LN #15 FORT MYERS, FL 33907

Current Mailing Address:

12734 KENWOOD LN #15 FORT MYERS, FL 33907 US

FEI Number: 27-3406296

Name and Address of Current Registered Agent:

DEAN, CONSTANCE A 12734 KENWOOD LN #15 FORT MYERS, FL 33907 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	CONSTANCE DEAN			01/25/2023
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	MANAGING MEMBER	
Name	STEWART, JAMES	Name	DEAN, CONSTANCE A	
Address	12734 KENWOOD LN #15	Address	12734 KENWOOD LN #15	
City-State-Zip:	FORT MYERS FL 33907	City-State-Zip:	FORT MYERS FL 33907	

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

Certificate of Status Desired: No

MANAGING MEMBER 01/25/2023

FILED Jan 25, 2023 Secretary of State 9356948002CC

Date