

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000015587

**Entity Name:** MARCE KINSTLE, LLC

**Current Principal Place of Business:**

533 N NOVA RD  
SUITE 103  
ORMOND , FL 32174

**Current Mailing Address:**

99 KNOLLWOOD ESTATES DR  
ORMOND , FL 32174 US

**FEI Number:** 45-3354587

**Certificate of Status Desired:** Yes

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

BARNACK, DEBORAH J  
4536 S CLYDE MORRIS BLVD  
SUITE 5  
PORT ORANGE, FL 32129 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 MGRM  
Name KINSTLE, MARCE R  
Address 99 KNOLLWOOD ESTATES DR  
City-State-Zip: ORMOND FL 32174

*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:** MARCE KINSTLE

MS

02/29/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date