

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000051195

**Entity Name:** 405 MARQUIS ST, LLC

**Current Principal Place of Business:**

568 CONIFER ST.  
MELBOURNE, FL 32904

**Current Mailing Address:**

568 CONIFER ST.  
MELBOURNE, FL 32904 US

**FEI Number: 83-1080004**

**Certificate of Status Desired:** No

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

WRIGHT, SHARON E  
568 CONIFER ST.  
MELBOURNE, FL 32904 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	MBR	Title	MBR
Name	WRIGHT, SHARON E	Name	DOMINGUE, LOUIS O JR.
Address	568 CONIFER ST.	Address	568 CONIFER ST.
City-State-Zip:	MELBOURNE FL 32904	City-State-Zip:	MELBOURNE FL 32904

*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:** SHARON E WRIGHT

MBR

01/11/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date