

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000208974

Entity Name: MY STORY VENUE LLC

Current Principal Place of Business:

27319 RTO NACIONAL DR
PUNTA GORDA, FL 33983

Current Mailing Address:

27319
PUNTA GORDA, FL 33983 US

FEI Number: 83-2203579

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AHLQUIST, KIMBERLY ANN
27319 PORTO NACIONAL DR
PUNTA GORDA, FL 33983 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: KIMBERLY A AHLQUIST

03/07/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name AHLQUIST, KIMBERLY ANN
Address 27319 PORTO NACIONAL DR
City-State-Zip: PUNTA GORDA FL 33983

Title MANAGER
Name MARTINEZ, DEANNA MARIE
Address 27319 PORTO NACIONAL DR
City-State-Zip: PUNTA GORDA FL 33983

Title MGR
Name SALAZAR, MARLENY GARCIA
Address 2280 EVERGLADES BLVD N
City-State-Zip: NAPLES FL 34120

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: KIMBERLY AHLQUIST

MGR

03/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date