## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000229607

Entity Name: NO LIMIT STREAMS LLC

**Current Principal Place of Business:** 

10380 SW VILLAGE CENTER DRIVE

#365

PORT ST LUCIE, FL 34987

## **Current Mailing Address:**

10380 SW VILLAGE CENTER DRIVE #365

PORT ST LUCIE, FL 34987 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SOUTH FLORIDA RA SERVICES LLC 10380 SW VILLAGE CENTER DRIVE #365 PORT ST LUCIE, FL 34987 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

FILED Apr 30, 2019

**Secretary of State** 

8433812877CC

## Authorized Person(s) Detail:

Title AP

Name SOUTH FLORIDA RA SERVICES LLC
Address 10380 SW VILLAGE CENTER DR #365

City-State-Zip: PORT ST LUCIE FL 34987

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: RICHARD P RAGO AGENT 04/30/2019