

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000045753

**Entity Name:** SANS SOUCI 6801, LLC

**Current Principal Place of Business:**

4446-1A HENDRICKS AVENUE  
#345  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

4446-1A HENDRICKS AVENUE  
#345  
JACKSONVILLE, FL 32207 US

**FEI Number:** 29-3789832

**Certificate of Status Desired:** No

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

MCMENAMY, WILLIAM B  
245 RIVERSIDE AVENUE SUITE 450  
JACKSONVILLE, FL 32202 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 AMBR  
Name NIMNIGHT, AMANDA  
Address 4446-1A HENDRICKS AVENUE  
#345  
City-State-Zip: JACKSONVILLE FL 32207

*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:** AMANDA NIMNIGHT

AMBR

04/12/2023

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

\_\_\_\_\_ Date