

**2022 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L19000296471

**Entity Name:** ACQUIRES.IO LLC

**Current Principal Place of Business:**

7159 CORKLAN DR., SUITE 100  
JACKSONVILLE, FL 32258

**Current Mailing Address:**

4947 SUMMIT VIEW DR.  
WESTLAKE VILLAGE, CA 91362-5610 US

**FEI Number:** 84-4081854

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC  
7901 RTH ST N. STE 300  
ST. PETERSBURG, FL 33702 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:** BILL HAVRE

11/08/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name SILVER, BONNIE  
Address 10714 GREENBRIAR VILLA DR.  
City-State-Zip: WELLINGTON FL 33449

Title AMBR  
Name STOMEL, VIVIAN  
Address 1684 BELLSHIRE CT.  
City-State-Zip: WESTLAKE VILLAGE CA 91362

Title AMBR  
Name STOMEL, JOSH  
Address 1684 BELLSHIRE CT.  
City-State-Zip: WESTLAKE VILLAGE CA 91362

Title AMBR  
Name SILVER, NOFAR  
Address 10714 GREENBRIAR VILLA DR.  
City-State-Zip: WELLINGTON FL 33449

*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:** VIVIAN STOMEL

MEMBER

11/08/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date