

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000004951

**Entity Name:** NEW LINKS, LLC

**Current Principal Place of Business:**

3347 FIVE POINTS ROAD  
COTTONDALE, FL 32431

**Current Mailing Address:**

3347 FIVE POINTS ROAD  
COTTONDALE, FL 32431 US

**FEI Number: 84-4264003**

**Certificate of Status Desired:** No

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

FIGGERS, PHILLIP  
3347 FIVE POINTS ROAD  
COTTONDALE, FL 32431 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	MGR	Title	MGR
Name	FIGGERS, PHILLIP	Name	FIGGERS, PAULA
Address	3347 FIVE POINTS ROAD	Address	3347 FIVE POINTS ROAD
City-State-Zip:	COTTONDALE FL 32431	City-State-Zip:	COTTONDALE FL 32431

*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: PHILLIP MICHAEL FIGGERS**

**OWNER**

**04/30/2023**

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

\_\_\_\_\_  
Date