

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000304789

**Entity Name:** MICHEL DOCUMENT SVCS, LLC

**Current Principal Place of Business:**

7901 4TH ST N STE 300  
PLANTATION, FL 33702

**Current Mailing Address:**

PO BOX 16031  
PLANTATION, FL 33318 US

**FEI Number:** 85-3193692

**Certificate of Status Desired:** No

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

MICHEL, CHRISTINA  
7901 4TH ST N STE 300  
PLANTATION, 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:** CHRISTINA MICHEL

04/30/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MICHEL, CHRISTINA  
Address PO BOX 16031  
City-State-Zip: PLANTATION FL 33318

*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:** CHRISTINA MICHEL

MANAGER

04/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date