

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000048592

Entity Name: STARKEMIND LLC

Current Principal Place of Business:

5730 TRAILWINDS DR.
UNIT 412
FORT MYERS, FL 33907

Current Mailing Address:

5730 TRAILWINDS DR.
UNIT 412
FORT MYERS, FL 33907 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POSS, GREGORY R
5730 TRAILWINDS DR.
UNIT 412
FORT MYERS, FL 33907 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
Name POSS, GREGORY R
Address 5730 TRAILWINDS DR.
 UNIT 412
City-State-Zip: FORT MYERS FL 33907

Title AR
Name POSS, EMILY
Address 5730 TRAILWINDS DR.
 UNIT 412
City-State-Zip: FORT MYERS FL 33907

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: GREGORY R. POSS

MGR

04/17/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date