2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPOR	Γ

DOCUMENT# L21000157216

Entity Name: SKINDRED SPIRITS TATTOO LLC

## **Current Principal Place of Business:**

488 US-90 DEFUNIAK SPRINGS, FL 32435

# **Current Mailing Address:**

3939 SAND PATH RD. BONIFAY, FL 32425 UN

## FEI Number: 86-3724813

# Name and Address of Current Registered Agent:

THOLE, GABE 3939 SAND PATH RD. BONIFAY, FL 32425 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

# Authorized Person(s) Detail :

Title	MGR	Title	AP
Name	THOLE, GABE L	Name	THOLE, NICOLE
Address	3939 SAND PATH RD.	Address	3939 SAND PATH RD.
City-State-Zip:	BONIFAY FL 32425	City-State-Zip:	BONIFAY FL 32425

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: NICOLE THOLE

AP

04/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 09, 2024 Secretary of State 7581870657CC

Date

Certificate of Status Desired: No