

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000161865

**Entity Name:** STRONG SIGNATURE NOTARY LLC

**Current Principal Place of Business:**

TIFFANY LOOP  
DAVENPORT, 33837

**Current Mailing Address:**

TIFFANY LOOP  
DAVENPORT, 33837 UN

**FEI Number: 88-1894917**

**Certificate of Status Desired: Yes**

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

STRONG, STACEY L  
TIFFANY LOOP  
DAVENPORT, FL 33837 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            PRESIDENT  
Name            STRONG, STACEY LYNETTE  
Address        TIFFANY LOOP  
City-State-Zip: DAVENPORT FL 33837

*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: STACEY LYNETTE STRONG**

**PRESIDENT**

**03/31/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date