## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000126329

Entity Name: SITIRIAM LLC

**Current Principal Place of Business:** 

15590 67TH CT N

LOXAHATCHEE, FL 33470

**Current Mailing Address:** 

15590 67TH CT N

LOXAHATCHEE . FL 33470 US

FEI Number: 92-3105048 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

**OUXILIARY LLC** 15590 67TH CT N

LOXAHATCHEE, FL 33470 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

**FILED** May 01, 2025

**Secretary of State** 

3835161687CC

## Authorized Person(s) Detail:

Title **AMBR** 

Name CAREY, NATHANIEL Address 15590 67TH COURT N City-State-Zip: LOXAHATCHEE FL 33470

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.

Electronic Signature of Signing Authorized Person(s) Detail