

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000189347

**Entity Name:** VICTORIA BORGES LLC

**Current Principal Place of Business:**

804 N 17TH AVE  
PENSACOLA, FL 32501

**Current Mailing Address:**

804 N 17TH AVE  
PENSACOLA, FL 32501 UN

**FEI Number:** 99-2638886

**Certificate of Status Desired:** No

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

BORGES, VICTORIA  
804 N 17TH AVE  
PENSACOLA, FL 32501 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 BORGES, VICTORIA  
Address 804 N 17TH AVE  
City-State-Zip: PENSACOLA FL 32501

*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:** VICTORIA BORGES

MGR

04/10/2025

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date