## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000360779 Entity Name: 5293 OBT, LLC

**Current Principal Place of Business:** 

3225 MCLEOD DR, SUITE 100 LAS VEGAS, NV 89121

## **Current Mailing Address:**

3225 MCLEOD DR, SUITE 100 LAS VEGAS. NV 89121 US

FEI Number: 99-4501680 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ANDERSON REGISTERED AGENTS, INC. 625 E. TWIGGS STREET, SUITE 110 TAMPA, FL 33602 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: JAMES MORRIS 03/19/2025

Electronic Signature of Registered Agent

Date

**FILED** Mar 19, 2025

**Secretary of State** 

5516544804CC

## Authorized Person(s) Detail:

Title **AMBR** 

Name US GROUP, LLC Address 1718 CAPITOL AVE.

City-State-Zip: CHEYENNE WY 82001

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: JAMES MORRIS **AUTH AGENT** 

Electronic Signature of Signing Authorized Person(s) Detail

03/19/2025 Date