

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000455664

**Entity Name:** INSTENSIFY LLC

**Current Principal Place of Business:**

802 E BAKER ST  
STE 102  
PLANT CITY, FL 33563

**Current Mailing Address:**

802 E BAKER ST  
STE 102  
PLANT CITY, FL 33563 US

**FEI Number:** 33-1702242

**Certificate of Status Desired:** No

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

ACCOUNTAX PRO  
802 E BAKER ST  
STE 101  
PLANT CITY, FL 33563 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 SIDDIQUI, AQEEL  
Address 155 MEYER AVE  
City-State-Zip: VALLEY STREAM NY 11580

*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:** AQEEL SIDDIQUI

**PRESIDENT**

**04/29/2025**

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

\_\_\_\_\_  
Date