

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000444151

**Entity Name:** TALLAHASSEE DATE NIGHT LLC

**Current Principal Place of Business:**

3433 N RIDGE RD  
TALLAHASSEE, FL 32305

**Current Mailing Address:**

3433 N RIDGE RD  
TALLAHASSEE, FL 32305 US

**FEI Number:** 87-3062440

**Certificate of Status Desired:** No

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

MURRAY, DEMETRIUS  
3433 N RIDGE RD  
TALLAHASSEE, FL 32305 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	Title	MGR
Name	DGDMME LLC	Name	MURRAY, DEMETRIUS
Address	P.O. BOX 486	Address	3433 N RIDGE RD
City-State-Zip:	QUINCY FL 32353	City-State-Zip:	TALLAHASSEE FL 32305

*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:** DEMETRIUS MURRAY

**OWNER**

**04/30/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date