

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000136273

**Entity Name:** SIMACTORY STUDIO LLC

**Current Principal Place of Business:**

261 NORTH UNIVERSITY DR  
SUITE 500 - 97  
PLANTATION, FL 33324

**Current Mailing Address:**

261 NORTH UNIVERSITY DR  
SUITE 500 - 97  
PLANTATION, FL 33324 US

**FEI Number:** 88-1607800

**Certificate of Status Desired:** Yes

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

FADEEV, NIKITA  
1801 NE 62ND ST  
APT. #128  
FORT LAUDERDALE, FL 33308 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 FADEEV, NIKITA  
Address 1801 NE 62ND ST  
APT. #128  
City-State-Zip: FORT LAUDERDALE FL 33308

*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:** FADEEV NIKITA

MGR

02/22/2024

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

\_\_\_\_\_  
Date