

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000230044

**Entity Name:** NYLA GROUP FL LLC

**Current Principal Place of Business:**

7826 BOWSPIRIT WAY  
LAKEWOOD RANCH, FL 34202

**Current Mailing Address:**

7826 BOWSPIRIT WAY  
LAKEWOOD RANCH, FL 34202 US

**FEI Number:** 88-2728397

**Certificate of Status Desired:** Yes

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

THOMSEN, AMBER  
7826 BOWSPIRIT WAY  
LAKEWOOD RANCH, FL 34202 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 THOMSEN, AMBER  
Address 7826 BOWSPIRIT WAY  
City-State-Zip: LAKEWOOD RANCH FL 34202

Title MGR  
Name THOMSEN, TED  
Address 7826 BOWSPIRIT WAY  
City-State-Zip: LAKEWOOD RANCH FL 34202

Title AUTHORIZED MEMBER  
Name THOMSEN, THOMAS STATE  
Address 17704 GAWTHROP DR UNIT 102  
City-State-Zip: BRADENTON FL 34211

*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:** THOMAS STATE THOMSEN

MEMBER

01/17/2023

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

\_\_\_\_\_  
Date