



Form Revision Date 07/2016

## ANNUAL STATEMENT

*(Required by Section 207, Act 23, Public Act of 1993)*

Identification Number:	802165420
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Annual Statement Filing Year: 2019
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1. Limited Liability Company Name: ID REGENCY LLC
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2. The street address of the limited liability company's registered office and name of the resident agent at that office:

1. Resident Agent Name: RICHIE WOLFE	
2. Street Address: 8845 EAST JEFFERSON AVE.	
Apt/Suite/Other:	
City: DETROIT	
State: MI	Zip Code: 48214

3. Mailing address of the registered office:

P.O. Box or Street Address: 8845 EAST JEFFERSON AVE.	
Apt/Suite/Other:	
City: DETROIT	
State: MI	Zip Code: 48214

This annual statement must be signed by a member, manager, or an authorized agent.

Signed this 1st Day of February, 2019 by:

Signature	Title	Title if "Other" was selected
Elliot Indig	Authorized Agent	

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

Decline       Accept

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS**

**FILING ENDORSEMENT**

***This is to Certify that the*** 2019 ANNUAL STATEMENT

***for***

ID REGENCY LLC

***ID Number:*** 802165420

***received by electronic transmission on*** February 01, 2019 ***, is hereby endorsed.***

***Filed on*** February 01, 2019 ***, by the Administrator.***

***The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.***



***In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 1st day of February, 2019.***

***Julia Dale, Director***

***Corporations, Securities & Commercial Licensing Bureau***