

Form Revision Date 07/2016

ANNUAL STATEMENT

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

Identification Number:		802165420
Annual Statement Filing Year: 2	2021	

1. Limited Liability Company Name:

ID REGENCY LLC

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:

6960 ORCHARD LAKE ROAD

Apt/Suite/Other:

SUITE 250

City:

WEST BLOOMFIELD

State: MI

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

Signed this 5th Day of February, 2021 by:

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

Zip Code: 48322

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.

jm Decline jm Accept

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS FILING ENDORSEMENT

This is to Certify that the 2021 ANNUAL STATEMENT

for

ID REGENCY LLC

ID Number: 802165420

received by electronic transmission on February 05, 2021 , is hereby endorsed.

Filed on February 05, 2021 , 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 5th day of February, 2021.

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau