



Form Revision Date 07/2016

ANNUAL STATEMENT
For use by DOMESTIC LIMITED LIABILITY COMPANY
(Required by Section 207, Act 23, Public Act of 1993)

Identification Number: 801751007

Annual Statement Filing Year: 2024

1. Limited Liability Company Name:
STOLDINI, 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: CHRISTOPHER M BROWN
2. Street Address: 2325 BELMONT CENTER DRIVE NE
Apt/Suite/Other: SUITE C
City: BELMONT
State: MI Zip Code: 49306
3. Mailing address of the registered office:
P.O. Box or Street Address: 2325 BELMONT CENTER DRIVE NE
Apt/Suite/Other: SUITE C
City: BELMONT
State: MI Zip Code: 49306

This annual statement must be signed by a member, manager, or an authorized agent.
Signed this 22nd Day of December, 2023 by:

Signature	Title	Title if "Other" was selected
Christopher M Brown	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.
jm Decline jm Accept

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

FILING ENDORSEMENT

This is to Certify that the 2024 ANNUAL STATEMENT

for

STOLDINI, LLC

ID Number: 801751007

received by electronic transmission on December 22, 2023 ***, is hereby endorsed.***

Filed on December 22, 2023, ***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 22nd day of December, 2023.

Linda Clegg

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau