

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019230

Entity Name: SERVICE NET SOLUTIONS OF FLORIDA LLC**Current Principal Place of Business:**650 MISSOURI AVENUE
JEFFERSONVILLE, IN 47130**Current Mailing Address:**650 MISSOURI AVENUE
JEFFERSONVILLE, IN 47130**FEI Number:** 30-0745238**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	MANAGER
Name	BRAUNS, JODY
Address	650 MISSOURI AVENUE
City-State-Zip:	JEFFERSONVILLE IN 47130
Title	ASST. SECRETARY
Name	KENT, TANYA E.
Address	1271 AVENUE OF THE AMERICAS 37TH FLOOR
City-State-Zip:	NEW YORK NY 10020

Title	MANAGER
Name	MANN, JESSICA M.
Address	1271 AVENUE OF THE AMERICAS 37TH FLOOR
City-State-Zip:	NEW YORK NY 10020

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: TANYA E. KENT**ASSISTANT SECRETARY** 04/17/2023_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date