

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000094180

**Entity Name:** HUDSONS LIQUIDATORS LLC

**Current Principal Place of Business:**

242 SMOKERISE TRACE  
PEACHTREE CITY , GA 30269

**Current Mailing Address:**

242 SMOKERISE TRACE  
PEACHTREE CITY , GA 30269 US

**FEI Number:** 80-0275194

**Certificate of Status Desired:** No

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

HUDSON, ERIC  
451 E ALTAMONTE DR#2405  
ALTAMONTE SPRINGS, FL 32701 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:** ERIC HUDSON

01/16/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name HUDSON, ERIC  
Address 242 SMOKERISE TRACE  
City-State-Zip: PEACHTREE CITY GA 30269

Title MGRM  
Name HUDSON, SUSAN E  
Address 242 SMOKERISE TRACE  
City-State-Zip: PEACHTREE CITY GA 30269

*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:** SUSAN HUDSON

OWNER

01/16/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date