

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000084255

**Entity Name:** WORKMAGIC, LLC

**Current Principal Place of Business:**

1200 ANASTASIA AVE  
SUITE 110  
CORAL GABLES, FL 33134

**Current Mailing Address:**

1200 ANASTASIA AVE  
SUITE 110  
CORAL GABLES, FL 33134 US

**FEI Number:** 27-0841965

**Certificate of Status Desired:** No

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

JOHNSON, FRANK  
1200 ANASTASIA AVE  
SUITE 110  
CORAL GABLES, FL 33134 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:** FRANK JOHNSON

04/19/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title DIRECTOR  
Name JOHNSON, FRANK  
Address 1200 ANASTASIA AVE  
SUITE 110  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name JOHNSON, PATRICIA GONZALEZ  
Address 1200 ANASTASIA AVE  
SUITE 110  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name JOHNSON, JR, FRANK T  
Address 1200 ANASTASIA AVE  
SUITE 110  
City-State-Zip: CORAL GABLES FL 33134

*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:** PATRICIA JOHNSON

**DIRECTOR**

04/19/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date