

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000107338

Entity Name: SOCIETY CONSULTING LLC**Current Principal Place of Business:**19400 TURNBERRY WAY
1531R
AVENTURA, FL 33180**Current Mailing Address:**15646 SW 40 ST
MIRAMAR, FL 33027 US**FEI Number:** 38-3821412**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILDER, MORENO
15646 SW 40 ST
MIRAMAR, FL 33027 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:** WILDER MORENO

02/12/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name CABRALES DAZA, JOSE ANTONIO
Address 15646 SW 40 ST
City-State-Zip: MIRAMAR FL 33027

Title AMBR
Name ZUNIGA BONFANTE, ANA ELOISA
Address 15646 SW 40 ST
City-State-Zip: MIRAMAR FL 33027

Title MANAGER
Name MORENO, WILDER
Address 15646 SW 40 ST
City-State-Zip: MIRAMAR FL 33027

Title AMBR
Name ARABIA ZUÑIGA, MARIA JOSE
Address 15646 SW 40 ST
City-State-Zip: MIRAMAR FL 33027

Title AMBR
Name ARABIA ZUÑIGA, ANA MARIA
Address 15646 SW 40 ST
City-State-Zip: MIRAMAR FL 33027

Title AMBR
Name DAZA DAZA, MARIA CRISTINA
Address 15646 SW 40 ST
City-State-Zip: MIRAMAR FL 33027

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: WILDER MORENO

MANAGER

02/12/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date