

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000083065

**Entity Name:** CONSULTING BY DESIGN LLC

**Current Principal Place of Business:**

81 PHILLIPS TER  
STE 205  
WEST HAVEN, CT 06516

**Current Mailing Address:**

81 PHILLIPS TER  
STE 205  
WEST HAVEN, CT 06516 US

**FEI Number:** 46-3253063

**Certificate of Status Desired:** No

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

KLASFELD, MICHAEL  
2424 NE 22ND ST  
POMPANO BEACH, FL 33062 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 MGRM  
Name KOHAN, ELAYNE  
Address 81 PHILLIPS TER  
City-State-Zip: WEST HAVEN CT 06516

*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:** ELAYNE KOHAN

**MANAGER**

**04/22/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date