

**2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000166870

**Entity Name:** SHADOW MANAGEMENT SERVICES LLC

**Current Principal Place of Business:**

2967 RED OAK DR.  
KISSIMMEE, FL 34744

**Current Mailing Address:**

2967 RED OAK DR.  
KISSIMMEE, FL 34744 US

**FEI Number:** 46-4218989

**Certificate of Status Desired:** No

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

POL, XAVIER  
2967 RED OAK DR.  
KISSIMMEE, FL 34744 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:** XAVIER POL

03/02/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name POL, XAVIER  
Address 2967 RED OAK DR.  
City-State-Zip: KISSIMMEE FL 34744

*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:** XAVIER POL

MGR

03/02/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date