## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000021805

**Entity Name: NEEDCORP LLC** 

**Current Principal Place of Business:** 

8870 N HIMES AVE #218 TAMPA, FL 33614

**Current Mailing Address:** 

8870 N HIMES AVE #218 TAMPA, FL 33614 US

FEI Number: 46-4765405 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEEDCORP LLC 8870 N HIMES AVE TAMPA, FL 33614 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: JOHN WISE 04/26/2019

Electronic Signature of Registered Agent

Date

FILED Apr 26, 2019

**Secretary of State** 

6283025020CC

## Authorized Person(s) Detail:

Title MANAGER Name WISE, JOHN

Address 8870 N HIMES AVE #218

City-State-Zip: TAMPA FL 33614

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: JOHN WISE MANAGEMENT 04/26/2019