

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000007167

**Entity Name:** SCHEDULING SOLUTIONS LLC

**Current Principal Place of Business:**

15705 PADDOCK DR  
MONTVERDE, FL 34756-3366

**Current Mailing Address:**

15705 PADDOCK DR  
MONTVERDE, FL 34756-3366 US

**FEI Number:** 47-2669479

**Certificate of Status Desired:** No

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

RODEN, JULIE W  
15705 PADDOCK DR  
MONTVERDE, FL 34756-3366 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	MGR	Title	AMBR
Name	RODEN, JULIE W	Name	RODEN, MICHAEL
Address	15705 PADDOCK DR	Address	15705 PADDOCK DR
City-State-Zip:	MONTVERDE FL 34756-3366	City-State-Zip:	MONTVERDE FL 34756-3366

*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:** JULIE RODEN

**MANAGER**

**03/22/2021**

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

\_\_\_\_\_  
Date