

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000069735

Entity Name: SIC - SMART INVESTMENT & CONSULTING, LLC**Current Principal Place of Business:**1801 N.ECONOLOCKHATCHEE TR
677698
ORLANDO, FL 32867**Current Mailing Address:**1801 N.ECONOLOCKHATCHEE TR
677698
ORLANDO, FL 32867 US**FEI Number:** 47-3789361**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FAIRFOOT, NELSON
1801 N.ECONOLOCKHATCHEE TR
677698
ORLANDO, FL 32867 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:** NELSON FAIRFOOT

01/18/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MRG
Name	FAIRFOOT, NELSON
Address	1801 N.ECONOLOCKHATCHEE TR 677698
City-State-Zip:	ORLANDO FL 32867
Title	MGR
Name	SANTOS, NICOLAS
Address	AV. LIBERTADOR # 7-20
City-State-Zip:	SAN FELIPE ESTADO YARACUY VE VENEZ-UELA
Title	MGR
Name	SANTOS, MAGDALENA
Address	AV. LIBERTADOR # 7-20
City-State-Zip:	SAN FELIPE, ESTADO YARACUY VE VENEZ-UELA

Title	AMBR
Name	SANTOS, FELIPE
Address	1801 N ECONOLOCKHATCHEE
City-State-Zip:	ORLANDO FL 32867
Title	MGR
Name	SANTOS, ISABEL
Address	AV. LIBERTADOR # 7-20
City-State-Zip:	SAN FELIPE ESTADO YARACUY VE VENEZ-UELA

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: FELIPE SANTOS

AMBR

01/18/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date