

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000105368

**Entity Name:** JUST A SMIDGE, LLC**Current Principal Place of Business:**8589 SOUTH US HWY 1  
PORT SAINT LUCIE, FL 34952**Current Mailing Address:**1361 SE BUCKINGHAM TERRACE  
PORT SAINT LUCIE, FL 34952**FEI Number:** 47-4287519**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HIGGINS, BARRY J  
1361 SE BUCKINGHAM TERRACE  
PORT SAINT LUCIE, FL 34952 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:** BARRY HIGGINS

03/15/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                            |
|-----------------|----------------------------|
| Title           | MANAGER                    |
| Name            | HIGGINS, LAUREN M          |
| Address         | 1361 SE BUCKINGHAM TERRACE |
| City-State-Zip: | PORT SAINT LUCIE FL 34952  |

|                 |                            |
|-----------------|----------------------------|
| Title           | MANAGER                    |
| Name            | HIGGINS, BARRY J           |
| Address         | 1361 SE BUCKINGHAM TERRACE |
| City-State-Zip: | PORT SAINT LUCIE FL 34952  |

|                 |                           |
|-----------------|---------------------------|
| Title           | MANAGER                   |
| Name            | STOUKY, JOSEPH            |
| Address         | 1590 SW LEXINGTON DRIVE   |
| City-State-Zip: | PORT SAINT LUCIE FL 34953 |

*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:** BARRY HIGGINS

MANAGER

03/15/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date