## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000114896

**Entity Name: SELFIE STUB LLC** 

**Current Principal Place of Business:** 

1646 W SNOW AVE UNIT 64

TAMPA, FL 33606

## **Current Mailing Address:**

1646 W SNOW AVE UNIT 64

TAMPA FL 33606 US

FEI Number: 81-3000771 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

VELOZ, JOVANY 1646 W SNOW AVE UNIT 64 TAMPA, FL 33606 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

**FILED** Feb 17, 2021

**Secretary of State** 

3321606832CC

Authorized Person(s) Detail:

Title MBR Title **MBR** 

VELOZ, JOVANY Name Name CHARLEVILL, JOHN T

1646 W SNOW AVE Address PO BOX 686 Address

UNIT 64

FESTUS MO 63028 City-State-Zip: City-State-Zip: TAMPA FL 33606

**MBR** Title Title **MBR** 

Name OSBORN, JOHN II Name SCHIMPF, NICHOLAS

Address 557 N WOODLAWN AVE Address 9121 MAUREEN LN City-State-Zip: KIRKWOOD MO 63122

City-State-Zip: ST. LOUIS MO 63123

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.