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: EVENS CIVIL

Electronic Signature of Signing Authorized Person(s) Detail

PRESIDENT MANAGER

hoth in the State of Electide

02/11/2024 Date

Certificate of Status Desired: No

FILED Feb 11, 2024 Secretary of State 3592773057CC

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000155744

Entity Name: EVENS SECURITY ACADEMY LLC

Current Principal Place of Business:

2800 WEST OAKLAND PARK BLVD 207 OAKLAND PARK, FL 33311

Current Mailing Address:

23237 SW 61ST AVE BOCA RATON, FL 33428

FEI Number: 93-3810946

Name and Address of Current Registered Agent:

CIVIL, EVENS 23237 SW 61ST AVE BOCA RATON, FL 33428 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:	EVENS CIVIL
	Electronic Signature of Registered Agent

Authorized Person(s) Detail :

TitleMGRNameCIVIL, EVENSAddress23237 SW 61ST AVECity-State-Zip:BOCA RATON FL 33428

02/11/2024 Date