

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000101110

**Entity Name:** A SMITH FAM ENDEAVORS, LLC

**Current Principal Place of Business:**

2109 LULA RD  
MINNEOLA, FL 34715

**Current Mailing Address:**

2109 LULA RD  
MINNEOLA, FL 34715 US

**FEI Number:** 46-3499057

**Certificate of Status Desired:** No

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

SMITH, AUSTIN J  
2109 LULA RD  
MINNEOLA, FL 34715 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	AMBR	Title	AMBR
Name	SMITH, AUSTIN J	Name	SMITH, AMY R
Address	2109 LULA RD	Address	2109 LULA RD
City-State-Zip:	MINNEOLA FL 34715	City-State-Zip:	MINNEOLA FL 34715

*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:** AUSTIN JOHN SMITH

**MEMBER**

**01/30/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date