

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000152686

**Entity Name:** 7172017 CONSULTING LLC

**Current Principal Place of Business:**

4525 COVE CIR APT 809  
ST PETERSBURG , FL 33708

**Current Mailing Address:**

4525 COVE CIRCLE 809  
ST, FL 33708 US

**FEI Number:** 83-3910269

**Certificate of Status Desired:** No

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

AMBROSE , PATRICK  
10773 70TH AVE N  
ST PETERSBURG , FL 33708 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:** PATRICK AMBROSE

02/19/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name KUPRES, NANCY L  
Address 4525 COVE CIR APT 809  
City-State-Zip: ST PETERSBURG FL 33708

*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:** NANCY KUPRES

MBR

02/19/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date