

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000189947

**Entity Name:** AJ STODDART LLC

**Current Principal Place of Business:**

406 W FRANCES AVE  
UNIT 2  
TAMPA, FL 33602

**Current Mailing Address:**

406 W FRANCES AVE  
UNIT 2  
TAMPA, FL 33602 US

**FEI Number:** 82-2940689

**Certificate of Status Desired:** No

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

STODDART, AMY L  
406 W FRANCES AVE  
UNIT 2  
TAMPA, FL 33602 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	STODDART, AMY L	Name	STODDART, JOSHUA J
Address	406 W FRANCES AVE UNIT 2	Address	406 W FRANCES AVE UNIT 2
City-State-Zip:	TAMPA FL 33602	City-State-Zip:	TAMPA FL 33602

*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:** JOSHUA STODDART

AMBR

01/22/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date