

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000210919

Entity Name: SEE ME IN A T, LLC

Current Principal Place of Business:

5282 CRUMP ROAD
TALLAHASSEE, FL 32309

Current Mailing Address:

PO BOX 3455
TALLAHASSEE, FL 32315

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRENTIS, WANDA
5282 CRUMP ROAD
TALLAHASSEE, FL 32309 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 MGR
Name PRENTIS, WANDA
Address PO BOX 3455
City-State-Zip: TALLAHASSEE FL 32315

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: WANDA PRENTIS

MGR

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date