

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000052837

**Entity Name:** SELOCHAN SERVICES LLC

**Current Principal Place of Business:**

5700 MEMORIAL HWY  
209  
TAMPA, FL 33615

**Current Mailing Address:**

805 DISTRICT CT.  
TAMPA, FL 33613 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

SELOCHAN, TRAVIS  
805 DISTRICT CT  
TAMPA, FL 33613 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:** TRAVIS SELOCHAN

02/01/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            SELOCHAN, TRAVIS D  
Address        805 DISTRICT CT  
City-State-Zip: TAMPA FL 33613

*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:** TRAVIS SELOCHAN

PRESIDENT

02/01/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date