#### 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: STANLEY SCOTT 04/10/2023

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: AFRICAN AMERICAN ECONOMIC RECOVERY THINK TANK, LLC

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## Current Principal Place of Business:

221 NORTH HOGAN STREET STE. 610 JACKSONVILLE, FL 32202

DOCUMENT# L18000055885

## **Current Mailing Address:**

PO BOX 2672 JACKSONVILLE, FL 32203

## FEI Number: 83-4341041

## Name and Address of Current Registered Agent:

SCOTT, STANLEY A. . 221 NORTH HOGAN STREET STE. 610 JACKSONVILLE, FL 32202 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: STANLEY ANTONIO SCOTT

Electronic Signature of Registered Agent

# Authorized Person(s) Detail :

TitleMANAGING DIRECTORNameSCOTT, SCOTT LAddressPO BOX 2672City-State-Zip:JACKSONVILLE FL 32203

Certificate of Status Desired: No

04/10/2023 Date

04/10/2023 Date