2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000252264

Entity Name: THE POCKETBOOK CONSULTANTS LLC

Current Principal Place of Business:

8555 COMMERCE CENTRE DRIVE PORT SAINT LUCIE. FL 34986

Current Mailing Address:

1819 SW NEWPORT ISLES BLVD PORT ST LUCIE, FL 34953 US

FEI Number: 83-2336267 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CHATMAN, KHALILAH C 1819 SW NEWPORT ISLES BOULEVARD PORT ST. LUCIE, FL 34953 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:

Address

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR, AUTHORIZED MEMBER Title MANAGER, AUTHORIZED

Name CHATMAN, KHALILAH REPRESENTATIVE
Name CHATMAN, JAMES R

1819 SW NEWPORT ISLES

BOULEVARD Address 1819 SW NEWPORT ISLES
BOULEVARD BOULEVARD

City-State-Zip: PORT ST. LUCIE FL 34953

City-State-Zip: PORT ST. LUCIE FL 34953

Title MANAGER, AUTHORIZED

REPRESENTATIVE
Name WALKER, MAKAIYA D

Address 1819 SW NEWPORT ISLES

BOULEVARD

City-State-Zip: PORT ST. LUCIE FL 34953

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: KHALILAH CHATMAN MGR/ AMBR

Electronic Signature of Signing Authorized Person(s) Detail

04/13/2021 Date

FILED Apr 13, 2021

Secretary of State

6971594195CC