

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000252264

Entity Name: THE POCKETBOOK CONSULTANTS LLC

Current Principal Place of Business:

9700 RESERVE BOULEVARD
SUITE 18
PORT SAINT LUCIE, FL 34986

Current Mailing Address:

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

FEI Number: 87-2446816

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CHATMAN, KHALILAH C
9700 RESERVE BOULEVARD
SUITE 18
PORT ST. LUCIE, FL 34986 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 CEO, MGR, AUTHORIZED MEMBER
Name CHATMAN, KHALILAH
Address 1819 SW NEWPORT ISLES
BOULEVARD
City-State-Zip: PORT ST. LUCIE FL 34953

Title MANAGER, AUTHORIZED
REPRESENTATIVE
Name CHATMAN, JAMES R
Address 1819 SW NEWPORT ISLES
BOULEVARD
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: JAMES R CHATMAN

**AUTHORIZED
REPRESENTATIVE**

04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date