

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000267493

Entity Name: SELAH ENTERPRISE FLORIDA LLC

Current Principal Place of Business:

6003 126TH AVE, NORTH
CLEARWATER, FL 33760

Current Mailing Address:

PO BOX 130723
TAMPA, FL 33681 US

FEI Number: 38-4099730

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORIDA TAX ADVISORY LLC
1700 MCMULLEN BOOTH RD
SUITE B3
CLEARWATER, FL 33759 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 CHEFRAN, YOSEF
Address 25941 US HWY 19 #15931
City-State-Zip: CLEARWATER FL 33766

Title AR
Name CHEFRAN, REBECCA
Address 25941 US HWY 19 #15931
City-State-Zip: CLEARWATER FL 33766

Title AUTHORIZED REPRESENTATIVE
Name YURI , KATS
Address 915 N FRANKLIN ST, APT 1902
City-State-Zip: TAMPA FL 33602

Title AUTHORIZED REPRESENTATIVE
Name BLIZER, DAN
Address 808 N FRANKLIN ST APT 2608
City-State-Zip: TAMPA FL 33602

Title AUTHORIZED REPRESENTATIVE
Name ILYOV, YIFTACH
Address 808 N FRANKLIN ST APT 3110
City-State-Zip: TAMPA FL 33602

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: REBECCA CHEFRAN

AR

02/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date