

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000060179

**Entity Name:** DARWINSMARTADVISOR LLC

**Current Principal Place of Business:**

4917 LYFORD CAY ROAD  
TAMPA, FL 33629

**Current Mailing Address:**

4917 LYFORD CAY ROAD  
TAMPA, FL 33629

**FEI Number:** 02-0544664

**Certificate of Status Desired:** No

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

MANAGEMENT SOLUTIONS LLC  
4917 LYFORD CAY ROAD  
TAMPA, FL 33629 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 MANAGENET SOLUTIONS LLC  
Address 4917 LYFORD CAY ROAD  
City-State-Zip: TAMPA FL 33629

*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:** ROBERT HARWOOD

MGR MBR

01/22/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date