

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000150556

Entity Name: 04SEASONSMOBILENOTARYSERVICE LLC

Current Principal Place of Business:

1352 WHITE PINE DRIVE
WELLINGTON, FL 33414

Current Mailing Address:

POBOX 19384
WEST PALM BEACH, FL 33416 98

FEI Number: 85-1615257

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WILLIAMS, DAWANDA D
1352 WHITE PINE DRIVE
WELLINGTON, FL 33414 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 WILLIAMS, DAWANDA D
Address POBOX 19384
City-State-Zip: WEST PALM BEACH FL 33416

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: DAWANDA WILLIAMS

MGR

04/23/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date