

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000293067

Entity Name: WALDEN CONSULTANTS LLC**Current Principal Place of Business:**3850 NW 183 ST
205
MIAMI GARDENS, FL 33055**Current Mailing Address:**3850 NW 183 ST
205
MIAMI GARDENS, FL 33055 UN**FEI Number:** 85-3055296**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WALDEN, IRIS
3850 NW 183 AT
205
MIAMI, FL 33055 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, KENNESSHIA
Address	3850 NW 183 ST, 205
City-State-Zip:	MIAMI FL 33055
Title	MGR
Name	ROBERTS, TODDERICK
Address	3850 NW 183 ST, 205
City-State-Zip:	MIAMI GARDENS FL 33055
Title	AMBR
Name	STOKES, THERESA
Address	2382 NW 73 TER #101
City-State-Zip:	MIAMI FL 33147

Title	MGR
Name	FREEMAN, JAMAURRIE
Address	3850 NW 183 ST, 205
City-State-Zip:	MIAMI GARDENS FL 33055
Title	AP
Name	ROBERTS, AVA
Address	3850 NW 183 ST, 205
City-State-Zip:	MIAMI GARDENS FL 33055
Title	CEO
Name	WALDEN, IRIS
Address	205
City-State-Zip:	MIAMI FL 33055

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: IRIS WALDEN

CEO

04/22/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date