

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000329618

**Entity Name:** SOFTSKIEZ LLC**Current Principal Place of Business:**6220 S ORANGE BLOSSOM TR  
STE 185  
ORLANDO, FL 32809**Current Mailing Address:**6220 S ORANGE BLOSSOM TR  
STE 185  
ORLANDO, FL 32825 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MANRRESA, ISABEL R  
6220 S ORANGE BLOSSOM TR  
STE 185  
ORLANDO, FL 32809 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	MANAGER, AUTHORIZED MEMBER, AUTHORIZED REPRESENTATIVE
Name	MANRRESA, ISABEL R
Address	6220 S ORANGE BLOSSOM TR STE 185
City-State-Zip:	ORLANDO FL 32809

Title	MANAGER/AUTHORIZED MEMBER/AUTHORIZED REPRESENTATIVE
Name	HICHO, MARFA
Address	6220 S ORANGE BLOSSOM TR 185
City-State-Zip:	ORLANDO FL 32809

*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:** MARFA HICHO

AM

04/24/2023

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