

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000370552

**Entity Name:** WEALTH ASSETS & PROPERTIES LLC

**Current Principal Place of Business:**

1857 WELLS RD  
SUITE 213C  
ORANGE PARK, .9 32065

**Current Mailing Address:**

1857 WELLS RD  
SUITE 213C  
ORANGE PARK, FL 32065 US

**FEI Number:** 87-2225565

**Certificate of Status Desired:** No

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

HALL, LATOSHIA S  
1857 WELLS RD  
SUITE 213  
ORANGE PARK, FL 32073 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 HALL, LATOSHIA S  
Address 1857 WELLS RD # 213  
City-State-Zip: ORANGE PARK FL 32073

Title AUTHORIZED MEMBER  
Name HALL, CLAUDE EDWARD JR.  
Address 1857 WELLS RD  
SUITE 213C  
City-State-Zip: ORANGE PARK FL 32065

Title CEO  
Name HALL, JASMINE ALEXIS  
Address 1857 WELLS RD  
SUITE 213C  
City-State-Zip: ORANGE PARK FL 32065

Title AUTHORIZED MEMBER  
Name HALL, JANA E NICOLE  
Address 1857 WELLS RD  
SUITE 213C  
City-State-Zip: ORANGE PARK FL 32065

Title AUTHORIZED MEMBER  
Name HALL, JAYLA ELISE  
Address 1857 WELLS RD  
SUITE 213C  
City-State-Zip: ORANGE PARK FL 32065

*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:** LATOSHIA S HALL

**MANAGER**

**04/30/2022**

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

\_\_\_\_\_  
Date