

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000096898

**Entity Name:** MELENDEZ MANAGEMENT CONSULTING, LLC

**Current Principal Place of Business:**

18735 ACKERMAN AVE  
PORT CHARLOTTE, FL 33948

**Current Mailing Address:**

18735 ACKERMAN AVE  
PORT CHARLOTTE, FL 33948 US

**FEI Number: 86-3012500**

**Certificate of Status Desired: No**

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

MELENDEZ, ROBIN LYNN  
18735 ACKERMAN AVE  
PORT CHARLOTTE, FL 33948 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: ROBIN LYNN MELENDEZ**

**02/24/2023**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name MELENDEZ, ROBIN  
Address 18735 ACKERMAN AVE  
City-State-Zip: PORT CHARLOTTE FL 33948

*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: ROBIN L MELENDEZ**

**PRESIDENT**

**02/24/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date