

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000114171

**Entity Name:** SMITHE SISTERS LLC

**Current Principal Place of Business:**

126 GODFREY LN.  
HOLLIDAYSBURG, PA 16648

**Current Mailing Address:**

126 GODFREY LN.  
HOLLIDAYSBURG, PA 16648

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

HERSHOFF, LUPINO, & YAGEL, LLP  
88539 OVERSEAS HWY  
TAVERNIER, FL 33070 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 AMBR  
Name ROSENBAUM, MAURA  
Address 126 GODFREY LN.  
City-State-Zip: HOLLIDAYSBURG PA 16648

Title AMBR  
Name ROBERTS, EILEEN  
Address 918 WALNUT ST  
City-State-Zip: HOLLIDAYSBURG PA 16648

Title MGR  
Name ROSENBAUM, MAURA  
Address 126 GODFREY LN.  
City-State-Zip: HOLLIDAYSBURG PA 16648

Title MGR  
Name ROBERTS, EILEEN  
Address 918 WALNUT ST  
City-State-Zip: HOLLIDAYSBURG PA 16648

*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:** MAURA ROSENBAUM

AMBR

02/18/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date