

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000218253

**Entity Name:** CLEVER HOLDINGS LLC

**Current Principal Place of Business:**

1019 ALIDO AVE  
LEHIGH ACRES, FL 33971

**Current Mailing Address:**

1019 ALIDO AVE  
LEHIGH ACRES, FL 33971 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

TIMELINE BUSINESS CENTER LLC  
8971 DANIELS CENTER DR 304  
FORT MYERS, FL 33912 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	Title	AMBR
Name	SILVA, FHABLO C	Name	DA SILVA, IVO V
Address	1105 ALBANY AVE	Address	1019 ALIDO AVE
City-State-Zip:	LEHIGH ACRES FL 33971	City-State-Zip:	LEHIGH ACRES FL 33971

*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:** FHABLO C SILVA

PR

01/25/2023

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

\_\_\_\_\_  
Date