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.

AMBR

SIGNATURE: ALEIXIS ACOSTA

Electronic Signature of Signing Authorized Person(s) Detail

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:

Authorized Person(s) Detail :					
Title	AMBR	Title	AMBR		
Name	ACOSTA, ALEIXIS	Name	ARIAS, ELSA		
Address	4078 CEDAR CREEK RANCH CIR	Address	4078 CEDAR CREEK RANCH CIRCLE		
City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	LAKE WORTH FL 33467		

# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000411288

Entity Name: SEEA17 INNOVATION & CONSULTING, LLC

#### **Current Principal Place of Business:**

4078 CEDAR CREEK RANCH CIR LAKE WORTH, FL 33467

## **Current Mailing Address:**

4078 CEDAR CREEK RANCH CIR LAKE WORTH. FL 33467

## FEI Number: 87-2713985

## Name and Address of Current Registered Agent:

ACOSTA, ALEIXIS 4078 CEDAR CREEK RANCH CIR LAKE WORTH, FL 33467 US

Electronic Signature of Registered Agent

FILED Feb 23, 2024

Secretary of State

Certificate of Status Desired: No

Date

02/23/2024

2490584303CC

Date