

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000480833

**Entity Name:** ADMIN SMART LLC

**Current Principal Place of Business:**

12220 WILD IRIS WAY  
UNIT 102  
ORLANDO, FL 32837

**FILED**  
**Feb 18, 2024**  
**Secretary of State**  
**9456372402CC**

**Current Mailing Address:**

12220 WILD IRIS WAY  
UNIT 102  
ORLANDO, FL 32837

**FEI Number:** 87-4127842

**Certificate of Status Desired:** No

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

ALONSO, CAMILO A  
12220 WILD IRIS WAY  
UNIT 102  
ORLANDO, FL 32837 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            ALONSO, CAMILO A  
Address        12220 WILD IRIS WAY UNIT 102  
City-State-Zip: ORLANDO FL 32837

Title            MGR  
Name            MELO, MARTHA C  
Address        12220 WILD IRIS WAY UNIT 102  
City-State-Zip: ORLANDO FL 32837

*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:** CAMILO A ALONSO

**MGR**

**02/18/2024**

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

\_\_\_\_\_  
Date