## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000003780

Entity Name: SHADOWMANCY, LLC

entity ramo. Of the Ovvivir and 1, 220

**Current Principal Place of Business:** 

171 SW PALM DRIVE UNIT 203

PORT ST. LUCIE, FL 34986

## **Current Mailing Address:**

171 SW PALM DR, UNIT 203 UNIT 2 PORT ST. LUCIE, FL 34986 UN

,

FEI Number: 87-4274633 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WELLS, CHIQUITA L 171 SW PALM DRIVE UNIT 203 PORT ST. LUCIE, FL 34986 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

FILED Apr 25, 2022

**Secretary of State** 

8112869668CC

## Authorized Person(s) Detail:

Title AP

Name WELLS, CHIQUITA L

Address 171 SW PALM DR, UNIT 203, UNIT 2

City-State-Zip: PORT ST. LUCIE FL 34986

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.