

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000116793

**Entity Name:** ACME STRATEGIES LLC

**Current Principal Place of Business:**

1630 N. MAIN ST.  
227  
WALNUT CREEK, CA 94596

**Current Mailing Address:**

1630 N. MAIN ST.  
227  
WALNUT CREEK, CA 94596 US

**FEI Number:** 88-1366840

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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            | WRIGHT, MIA L         | Name            | HOLLIDAY, CHRISTOPHER A |
| Address         | 1630 N. MAIN ST. #227 | Address         | 1630 N. MAIN ST. #227   |
| City-State-Zip: | WALNUT CREEK CA 94596 | City-State-Zip: | WALNUT CREEK CA 94596   |

*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:** MIA WRIGHT

**AUTHORIZED MEMBER**

**03/01/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date