#### **2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000193739

Entity Name: SMART TRANSFER SOLUTIONS LLC

FILED Feb 25, 2024 Secretary of State 3601302733CC

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

121 ALHAMBRA PLAZA STE 1110 CORAL GABLES. FL 33134

## **Current Mailing Address:**

121 ALHAMBRA PLAZA STE 1110 CORAL GABLES. FL 33134 US

FEI Number: 88-2337797 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

INTERAMERICAN CORPORATE SERVICES LLC 2525 PONCE DE LEON BLVD PH 12TH FL CORAL GABLES, FL 33134 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 Title MGR

Name PEREDA, ARIEL I Name VEGA, JOHAN

Address 121 ALHAMBRA PLAZA STE 1110 Address 121 ALHAMBRA PLAZA STE 1110

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MGR Title P

Name HERNANDEZ, OSNIEL Name HERNANDEZ, OSNIEL

Address 121 ALHAMBRA PLAZA STE 1110 Address 121 ALHAMBRA PLAZA STE 1110

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title VCFO Title VS

Name PEREDA, ARIEL Name VEGA, JOHAN

Address 121 ALHAMBRA PLAZA STE 1110 Address 121 ALHAMBRA PLAZA STE 1110

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

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: ARIEL PEREDA DIRECTOR & CFO 02/25/2024