## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000011670

Entity Name: SOFTMARK ASSOCIATES LLC

**Current Principal Place of Business:** 

4606 OAK HAMMOCK CT. PONCE INLET. FL 32127

**Current Mailing Address:** 

4606 OAK HAMMOCK CT. PONCE INLET. FL 32127 US

FEI Number: 46-1851650 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, ROBIN 4606 OAK HAMMOCK CT. PONCE INLET, FL 32127 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** Jan 15, 2018

**Secretary of State** 

CC0001905541

Authorized Person(s) Detail:

Title

Title VΡ

Address

Name SMITH, ROBIN Name SMITH, SHEWELL

Address 4606 OAK HAMMOCK CT.

City-State-Zip: PONCE INLET FL 32127

4606 OAK HAMMOCK CT.

City-State-Zip: PONCE INLET FL 32127

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: ROBIN H. SMITH

Electronic Signature of Signing Authorized Person(s) Detail

**PRESIDENT** 

01/15/2018