

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000102296

**Entity Name:** SMART FAM FLORIDA LLC

**Current Principal Place of Business:**

447 BOTTICELLI DR  
NOKOMIS, FL 34275

**Current Mailing Address:**

447 BOTTICELLI DR  
NOKOMIS, FL 34275 US

**FEI Number:** 46-3257739

**Certificate of Status Desired:** Yes

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

SMART, PETER  
447 BOTTICELLI DR  
NOKOMIS, FL 34275 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  
Name            SMART, PETER  
Address        447 BOTTICELLI DR  
City-State-Zip: NOKOMIS FL 34275

Title            AMBR  
Name            SMART, PATRICIA  
Address        447 BOTTICELLI DR  
City-State-Zip: NOKOMIS FL 34275

*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:** PETER SMART

**OWNER**

**02/09/2019**

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

\_\_\_\_\_  
Date