

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000163297

**Entity Name:** S-ONE SERVICES, LLC

**Current Principal Place of Business:**

1605 MAIN STREET  
SUITE 300  
SARASOTA, FL 34236

**Current Mailing Address:**

4728 S TAMIAMI TRAIL  
SARASOTA, FL 34231 US

**FEI Number:** 37-1744700

**Certificate of Status Desired:** Yes

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

MASCIO, GINA L  
4728 S TAMIAMI TRAIL  
SARASOTA, FL 34231 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            PRESIDENT/CHIEF EXECUTIVE OFFICER  
Name            SIMKINS, RONALD T  
Address        1605 MAIN STREET SUITE 300  
City-State-Zip: SARASOTA FL 34236

Title            SECRETARY  
Name            LAMBERT, ARTHUR D  
Address        1605 MAIN STREET SUITE 300  
City-State-Zip: SARASOTA FL 34236

Title            COO  
Name            METNICK, JASON  
Address        1605 MAIN STREET SUITE 300  
City-State-Zip: SARASOTA FL 34236

Title            CFO  
Name            MASCIO, GINA  
Address        4728 S TAMIAMI TRAIL  
City-State-Zip: SARASOTA FL 34231

Title            CHIEF REVENUE OFFICER  
Name            LEHMAN, JUSTIN  
Address        1605 MAIN STREET SUITE 300  
City-State-Zip: SARASOTA FL 34236

Title            CHIEF MARKETING OFFICER  
Name            BELZER, TERRY LYNN  
Address        1605 MAIN STREET SUITE 300  
City-State-Zip: SARASOTA FL 34236

*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:** GINA L MASCIO

CFO

04/03/2023

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

\_\_\_\_\_  
Date