

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000177190

Entity Name: HEMMER POLI, LLC**Current Principal Place of Business:**9800 4TH ST N
#200
ST PETERSBURG, FL 33702**Current Mailing Address:**9800 4TH ST N
#200
ST PETERSBURG, FL 33702 US**FEI Number:** 47-3820175**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HEMMER, CHRIS
9800 4TH ST N
#200
ST PETERSBURG, FL 33702 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:** CHRIS HEMMER

04/29/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM
Name	HEMMER CONSULTING, LLC
Address	9800 4TH ST N #200
City-State-Zip:	ST PETERSBURG FL 33702
Title	AUTHORIZED MEMBER
Name	CAPPELLI, ANGELO
Address	C/O EXECUTIVE CENTER SUITES 9800 - 4TH ST N, STE 200
City-State-Zip:	ST. PETERSBURG FL 33702

Title	MGRM
Name	POLI SOLUTIONS CONSULTING, LLC
Address	C/O EXECUTIVE CENTER SUITES 9800 - 4TH ST N, STE 200
City-State-Zip:	ST. PETERSBURG FL 33702
Title	AUTHORIZED MEMBER
Name	HEMMER, FRED
Address	9800 4TH ST N #200
City-State-Zip:	ST PETERSBURG FL 33702

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: FRED HEMMER

MANAGER

04/29/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date