

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000147207

**Entity Name:** 21/58 CONNECT, LLC

**Current Principal Place of Business:**

10134 DOUGLAS OAKS CIRCLE  
UNIT 104  
TAMPA, FL 33616

**FILED**  
**Jan 30, 2019**  
**Secretary of State**  
**3901468168CC**

**Current Mailing Address:**

10134 DOUGLAS OAKS CIRCLE  
#104  
TAMPA, FL 33610 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

FEE, DEBORAH L.  
10134 DOUGLAS OAKS CIRCLE  
#104  
TAMPA, FL 33616 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:** DEBORAH L. FEE

01/30/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name FEE, KATHLEEN A  
Address 3 OAK STREET  
UNIT A  
City-State-Zip: NORTH AURORA IL 60542

Title AUTHORIZED MEMBER  
Name FEE, DEBORAH  
Address 10134 DOUGLAS OAKS CIRCLE  
#104  
City-State-Zip: TAMPA FL 33610

Title MGR  
Name ROIREAU, BECKY  
Address 3 OAK STREET  
UNIT A  
City-State-Zip: NORTH AURORA IL 60542

*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:** KATHLEEN FEE

MGR

01/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date