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.

OWNER

SIGNATURE: CARL E. THOMAS

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L14000154782

2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

Entity Name: USVI CONSULTING LLC

## **Current Principal Place of Business:**

10201 COURTNEY PALMS BLVD. #202 TAMPA, FL 33619

## **Current Mailing Address:**

PO BOX 310774 TAMPA, FL 33680

## FEI Number: 47-2137640

## Name and Address of Current Registered Agent:

THOMAS, CARL E 10201 COURTNEY PALMS BLVD #202 TAMPA, FL 33619 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:	CARL THOMAS	MAS		12/22/2020
		Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :					
	Title	MGR	Title	MGR	
	Name	THOMAS, CARL E	Name	JACOBS, CHRISTINE	
	Address	PO BOX 310774	Address	PO BOX 310774	
	City-State-Zip:	TAMPA FL 33680	City-State-Zip:	TAMPA FL 33680	

Certificate of Status Desired: No

FILED Dec 22, 2020 Secretary of State 1496247453CR

> 12/22/2020 Date