

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000117242

**Entity Name:** SHIPMUNK SOLUTIONS LLC

**Current Principal Place of Business:**

4201 WESTGATE AVE  
#B16  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

4201 WESTGATE AVE  
#B16  
WEST PALM BEACH, FL 33409 US

**FEI Number:** 47-4500094

**Certificate of Status Desired:** No

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

WALTER, GALEN  
4371 NORTHLAKE BLVD  
#243  
PALM BEACH GARDENS, FL 33410 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            WALTER, GALEN  
Address        4371 NORTHLAKE BLVD  
                  #243  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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:** GALEN WALTER

**OWNER**

**06/30/2020**

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

\_\_\_\_\_  
Date