

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000079329

**Entity Name:** UDOM LLC

**Current Principal Place of Business:**

7901 4TH ST N  
SUITE 300  
ST. PETERSBURG, FL 33702

**Current Mailing Address:**

PO BOX 49034  
COLORADO SPRINGS, CO 80949-9034 US

**FEI Number:** 81-2346352

**Certificate of Status Desired:** Yes

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

REGISTERED AGENTS INC.  
7901 4TH STREET NORTH  
SUITE 300  
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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                                |                 |                                |
|-----------------|--------------------------------|-----------------|--------------------------------|
| Title           | AMBR                           | Title           | AMBR                           |
| Name            | JOHNSON, BLAIN A               | Name            | PRATEEPWATTANAWIT, SUNISA      |
| Address         | PO BOX 49034                   | Address         | PO BOX 49034                   |
| City-State-Zip: | COLORADO SPRINGS CO 80949-9034 | City-State-Zip: | COLORADO SPRINGS CO 80949-9034 |

*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:** BLAIN A. JOHNSON

AMBR

04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date