

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000166750

Entity Name: ALLIANT SSP LLC

Current Principal Place of Business:

2000 E 11TH AVE
TAMPA, FL 33605

Current Mailing Address:

P.O. BOX 5238
TAMPA, FL 33675 US

FEI Number: 81-3772388

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALFONSO, CARLOS J
2000 E 11TH AVE
TAMPA, FL 33605 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: CARLOS J. ALFONSO

04/25/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name NERTNEY, JOHN
Address P.O. BOX 5238
City-State-Zip: TAMPA FL 33675

Title AMBR
Name ALFONSO, CARLOS
Address 2000 E 11TH AVE
City-State-Zip: TAMPA FL 33605

Title AMBR
Name CAPITANO, FRANK DAVID
Address P.O. BOX 5238
City-State-Zip: TAMPA FL 33675

Title AMBR
Name CAPITANO, JOSEPH JR
Address P.O. BOX 5238
City-State-Zip: TAMPA FL 33675

Title AMBR
Name DEL MONTE, ANGEL
Address 2000 E 11TH AVE
City-State-Zip: TAMPA FL 33605

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: FRANK DAVID CAPITANO

MBR

04/25/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date