

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000020222

**Entity Name:** SOPHIA ALLEN, LLC

**Current Principal Place of Business:**

6919 W. BROWARD BLVD  
215  
PLANTATION, FL 33317

**Current Mailing Address:**

6919 W. BROWARD BLVD  
215  
PLANTATION, FL 33317 UN

**FEI Number:** 82-3787419

**Certificate of Status Desired:** No

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

ALLEN, SOPHIA  
6919 W. BROWARD BLVD  
215  
PLANTATION, FL 33317 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:** SOPHIA ALLEN

02/05/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ALLEN, SOPHIA  
Address 6919 W. BROWARD BLVD,# 215  
City-State-Zip: PLANTATION FL 33317

*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:** SOPHIA ALLEN

MGR

02/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date