## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000022815

**Entity Name: ELEVATE 7 LLC** 

**Current Principal Place of Business:** 

405 SOUTH DALE MABRY HWY SUITE 371

TAMPA, FL 33609

## **Current Mailing Address:**

405 SOUTH DALE MABRY HWY SUITE 371 TAMPA. FL 33609

FEI Number: 81-5199025 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CAMPOS, MARIA 405 SOUTH DALE MABRY HWY SUITE 371 TAMPA, FL 33609 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: MARIA CAMPOS 04/09/2018

Electronic Signature of Registered Agent

Date

## Authorized Person(s) Detail:

Title MGR

Name CAMPOS, MARIA

405 SOUTH DALE MABRY HWY SUITE Address

City-State-Zip: TAMPA FL 33609

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.

04/09/2018 **MGR** SIGNATURE: MARIA CAMPOS

Electronic Signature of Signing Authorized Person(s) Detail

Date

**FILED** Apr 09, 2018

**Secretary of State** 

CC5746907717