

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000081190

**Entity Name:** SMILEY CONSULTING ASSOCIATES LLC

**Current Principal Place of Business:**

1704 SW MOCKINGBIRD DRIVE  
PORT ST LUCIE, FL 34986

**Current Mailing Address:**

1704 SW MOCKINGBIRD DRIVE  
PORT ST LUCIE, FL 34986 US

**FEI Number:** 82-1185397

**Certificate of Status Desired:** No

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

SMILEY, SCOTT  
1704 SW MOCKINGBIRD DRIVE  
PORT ST LUCIE, FL 34986 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 MGR  
Name SMILEY, MARILYN A  
Address 1704 SW MOCKINGBIRD DRIVE  
City-State-Zip: PORT ST LUCIE FL 34986

Title MGR  
Name SMILEY, SCOTT  
Address 1704 SW MOCKINGBIRD DRIVE  
City-State-Zip: PORT ST LUCIE FL 34986

*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:** SCOTT SMILEY

MGR

02/25/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date