#### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000176152

**Entity Name: CLEVER SMALL BUSINESS SOLUTIONS LLC** 

**FILED** Apr 18, 2019 **Secretary of State** 3535150820CC

### **Current Principal Place of Business:**

2925 NW 126 AVE.

1-319

SUNRISE, FL 33323

# **Current Mailing Address:**

2925 NW 126 AVE. APT. # 1-319

SUNRISE, FL 33323 US

FEI Number: 82-2512357 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

EMANUELLI, GIANCARLO 2925 NW 126 AVE. APT. # 1-319

SUNRISE, FL 33323 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: GIANCARLO EMANUELLI

04/18/2019

Electronic Signature of Registered Agent

Date

## Authorized Person(s) Detail:

Title MGR Title MGR

Name EMANUELLI, GABRIEL R Name EMANUELLI, GIANCARLO

2925 NW 126 AVE. 2925 NW 126 AVE. Address Address APT. # 1-319

1-319

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

Title **AMBR** 

Name MUSA, MAYELIN Address 2925 NW 126 AVE.

APT. # 1-319

City-State-Zip: SUNRISE FL 33323

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.