

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000013688

Entity Name: TRANSCENDENT MULTISERVICE ASSIST, LLC

Current Principal Place of Business:

9526 ARGYLE FOREST BLVD
SUITE B2 #346
JACKSONVILLE, FL 32222

Current Mailing Address:

9526 ARGYLE FOREST BLVD
SUITE B2 #346
JACKSONVILLE, FL 32222 US

FEI Number: 86-4641959

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KEENEY, WENDI J
9526 ARGYLE FOREST BLVD
SUITE B2 #346
JACKSONVILLE, FL 32222 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 KEENEY, WENDI J
Address 9526 ARGYLE FOREST BLVD SUITE
B2 #346
City-State-Zip: JACKSONVILLE FL 32222

Title MGR
Name KEENEY, DAVID J
Address 9526 ARGYLE FOREST BLVD SUITE
B2 #346
City-State-Zip: JACKSONVILLE FL 32222

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: WENDI KEENEY

MRS.

01/19/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date