

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000085552

**Entity Name:** ALMA SUPPORT SERVICES LLC

**Current Principal Place of Business:**

890 N VILLAGE DR  
102  
ST PETERSBURG, FL 33716

**Current Mailing Address:**

PO BOX 2233  
LARGO, FL 33779 US

**FEI Number:** 82-5033986

**Certificate of Status Desired:** No

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

MENSAH, EBONY P  
890 N VILLAGE DR  
102  
ST PETERSBURG, FL 33716 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 MENSAH, EBONY  
Address 890 N VILLAGE DR  
102  
City-State-Zip: ST PETERSBURG FL 33716

*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:** EBONY MENSAH

MGR

02/02/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date