

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000167983

**Entity Name:** SAMPIE SUPERIOR MOBILE BODYWORK"LLC"

**Current Principal Place of Business:**

5475 WILMINGTON CIRCLE SUITE 204  
LAKELAND, FL 33813

**Current Mailing Address:**

5475 WILMINGTON CIRCLE SUITE 204  
LAKELAND, FL 33813 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

JONES, DAVID  
5475 WILMINGTON CIRCLE SUITE 204  
LAKELAND, FL 33813 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:** DAVID JONES

04/28/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name JONES, DAVID  
Address 5475 WILMINGTON CIRCLE SUITE 204  
City-State-Zip: LAKELAND FL 33813

Title AMBR  
Name AUSTIN, SOPHIA  
Address 5475 WILMINGTON CIRCLE SUITE 204  
City-State-Zip: LAKELAND FL 33813

Title AP  
Name JONES, LILLIE  
Address 5475 WILMINGTON CIRCLE SUITE 204  
City-State-Zip: LAKELAND FL 33813

*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:** DAVID JONES

MGR

04/28/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date