

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000280040

**Entity Name:** STELLAR CONSULTING, LLC

**Current Principal Place of Business:**

1570 LAKEVIEW DRIVE  
SUITE 1  
SEBRING, FL 33870

**Current Mailing Address:**

PO BOX 7728  
SEBRING, FL 33872 US

**FEI Number:** 32-0585700

**Certificate of Status Desired:** No

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

ROSIN, STEPHANIE M  
4068 CAMP SHORE DRIVE  
SEBRING, FL 33875 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	MBR	Title	MBR
Name	ROSIN, STEPHANIE M	Name	GARVEY, COLE W
Address	4068 CAMP SHORE DRIVE	Address	4068 CAMP SHORE DRIVE
City-State-Zip:	SEBRING FL 33875	City-State-Zip:	SEBRING FL 33875

*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:** STEPHANIE M ROSIN

**MEMBER**

**01/03/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date