

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000028216

Entity Name: MIND MEND, LLC**Current Principal Place of Business:**289 NE SAGAMORE TERRACE
PORT SAINT LUCIE , FL 34983**Current Mailing Address:**289 NE SAGAMORE TERRACE
PORT SAINT LUCIE, FL 34983 US**FEI Number:** 83-3518906**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MANNING, PAMELA C
289 NE SAGAMORE TERRACE
PORT SAINT LUCIE, FL 34983 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	MANNING, RALPH G
Address	289 NE SAGAMORE TERRACE
City-State-Zip:	PORT SAINT LUCIE FL 34983

Title	AP
Name	MANNING, PAMELA C
Address	289 NE SAGAMORE TERRACE
City-State-Zip:	PORT SAINT LUCIE FL 34983

Title	AP
Name	BROCK, GABRIELLE C
Address	289 NE SAGAMORE TERRACE
City-State-Zip:	PORT SAINT LUCIE US 34983

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: RALPH MANNING

MGR

04/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date