

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000151719

**Entity Name:** SJM PROFESSIONAL SERVICES, LLC.

**Current Principal Place of Business:**

121 RIACHUELO LN  
ST AUGUSTINE, FL 32095

**Current Mailing Address:**

121 RIACHUELO LN  
ST AUGUSTINE, FL 32095 US

**FEI Number:** 84-3121628

**Certificate of Status Desired:** No

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

SOLIS, AURA G  
121 RIACHUELO LN  
ST AUGUSTINE, FL 32095 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	Title	MGR
Name	MEKOSKI, SETH J	Name	SOLIS, AURA G
Address	121 RIACHUELO LN	Address	121 RIACHUELO LN
City-State-Zip:	ST AUGUSTINE FL 32095	City-State-Zip:	ST AUGUSTINE FL 32095

*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:** AURA GISSELLE SOLIS

**PARTNER**

**04/15/2021**

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

\_\_\_\_\_  
Date