

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000027206

Entity Name: A & O HOSPITALITY MANAGEMENT SOLUTIONS, LLC

Current Principal Place of Business:

93 DUNES LAKE CIRCLE
APT J104
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

93 DUNES LAKE CIRCLE
APT J104
SANTA ROSA BEACH, FL 32459 US

FEI Number: 84-4781670

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

REGISTERED AGENTS, INC
7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 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 | SEWELL, ANALEE | Name | SCOTT, ORVILLE |
| Address | 93 DUNES LAKE CIRCLE APT J104 | Address | 93 DUNES LAKE CIRCLE APT J104 |
| City-State-Zip: | SANTA ROSA BEACH FL 32459 | City-State-Zip: | SANTA ROSA BEACH FL 32459 |

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: ANALEE SEWELL

OWNER

07/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date