

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000045431

Entity Name: SAVVY SISTAS, LLC

Current Principal Place of Business:

200 AVE. K SE
375
WINTER HAVEN, FL 33880

Current Mailing Address:

200 AVE. K SE
375
WINTER HAVEN, FL 33880

FEI Number: 84-4740820

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

THOMPSON, RASHEDA C
200 AVE. K SE
375
WINTER HAVEN, FL 33880 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 AMBR
Name THOMPSON, KENYATE Y
Address 619 AVE. D SE
City-State-Zip: WINTER HAVEN FL 33880

Title AUTHORIZED MEMBER, MANAGER
Name THOMPSON, RASHEDA CHELLEVON
Address 200 AVE. K SE
375
City-State-Zip: WINTER HAVEN FL 33880

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: RASHEDA THOMPSON

MANAGER

02/03/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date