

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000084424

**Entity Name:** HDMS LLC

**Current Principal Place of Business:**

3898 HWY 4  
JAY, FL 32565

**Current Mailing Address:**

PO BOX 189  
JAY, FL 32565 US

**FEI Number:** 85-0595590

**Certificate of Status Desired:** No

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

SCOTT, MICHAEL D  
3898 HWY 4  
JAY, FL 32565 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	Title	SM
Name	SCOTT, MICHAEL D	Name	DOWNEY, HARRELL G
Address	P.O. BOX 189	Address	P.O. BOX 189
City-State-Zip:	JAY FL 32565	City-State-Zip:	JAY FL 32565

*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:** HARRELL DOWNEY

**PARTNER**

**04/25/2022**

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

\_\_\_\_\_  
Date