

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000160171

**Entity Name:** FREE MIND SOLUTIONS LLC

**Current Principal Place of Business:**

516 SE 35TH TER  
HOMESTEAD , FLORIDA, AL 33033

**Current Mailing Address:**

PSC 400  
BOX 4847  
APO, AL 96273 US

**FEI Number:** 82-5459462

**Certificate of Status Desired:** Yes

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

DELGADO-PAYNE, SHARMANE M  
516 SE 35TH TER  
HOMESTEAD, FL 33033 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 MGRM  
Name DELGADO-PAYNE, SHARMANE M  
Address 516 SE 35TH TER  
City-State-Zip: HOMESTEAD FL 33033

*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:** SHARMANE DELGADO-PAYNE

SOLEMBR

04/30/2021

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

\_\_\_\_\_  
Date