

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000182650

Entity Name: SECOND FAMILY SOAP COMPANY LLC**Current Principal Place of Business:**20127 BAY CEDAR AVE
TAMPA, FL 33647**Current Mailing Address:**PO BOX 46335
TAMPA, FL 33646**FEI Number:** 85-1650693**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AKVAN, SHAHRAM
20127 BAY CEDAR AVE
TAMPA, FL 33647 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
Name	AKVAN, SHAHRAM
Address	20127 BAY CEDAR AVE
City-State-Zip:	TAMPA FL 33647

Title	MGR
Name	HEINRICH, JOSH R
Address	401 WELLINGTON PARKWAY
City-State-Zip:	PALM HARBOR FL 34685

Title	MGR
Name	DUNLAP, BRAD E
Address	10601 MENCHACA RD APT 10108
City-State-Zip:	AUSTIN TX 78748

Title	MGR
Name	DAYERIZADEH, RAHELEH
Address	20127 BAY CEDAR AVE
City-State-Zip:	TAMPA FL 33647

Title	MGR
Name	HEINRICH, LESLEY T
Address	401 WELLINGTON PARKWAY
City-State-Zip:	PALM HARBOR FL 34685

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: SHAHRAM AKVAN

SVP

04/08/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date