

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000363348

**Entity Name:** CRAFT BUSINESS CONSULTING LLC

**Current Principal Place of Business:**

14059 RIVEREDGE DR  
9107  
TAMPA, 33637

**Current Mailing Address:**

14059 RIVEREDGE DR  
9107  
TAMPA, 33637 UN

**FEI Number:** 86-1819160

**Certificate of Status Desired:** No

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

JENSON, SCOTT M  
14059 RIVEREDGE DR  
9107  
TAMPA, FL 33637 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 JENSON, SCOTT M  
Address 14059 RIVEREDGE DR  
9107  
City-State-Zip: TAMPA 33637

*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:** SCOTT JENSON

**PRINCIPAL**

**02/09/2023**

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

\_\_\_\_\_  
Date