

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000373843

**Entity Name:** THE 4 WISE MEN AT THE BARBERSHOP LLC**Current Principal Place of Business:**2091 S. RONALD REAGAN BLV  
ALTAMONTE SPRINGS, FL 32701**Current Mailing Address:**2091 S. RONALD REAGAN BLV  
ALTAMONTE SPRINGS, FL 32701 US**FEI Number:** 86-1427307**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SIMPSON, IRVIN  
2091 S. RONALD REAGAN BLV  
ALTAMONTE SPRINGS, FL 32701 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            PRESIDENT/MANAGER  
Name            BENTLEY, KENNETH  
Address        1118 PERSIMMON AVE  
City-State-Zip: SANFORD FL 32771

Title            VP/MANAGER  
Name            MALONE, CUBIT JR  
Address        420 WILTON CIRCLE  
City-State-Zip: SANFORD FL 32773

Title            TREASURER/MANAGER  
Name            HAMPTON, DAVION  
Address        1211 ARBOR LAKES  
City-State-Zip: SANFORD FL 32771

Title            SECRETARY/MANAGER  
Name            SIMPSON, IRVIN  
Address        2091 S. RONALD REAGAN BLV  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

*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:** IRVIN SIMPSON**SECRETARY****04/28/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date