

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000052058

**Entity Name:** URBAN WISEMAN, LLC

**Current Principal Place of Business:**

1801 NE 123 STREET,  
SUITE 314  
MIAMI, FL 33181

**Current Mailing Address:**

1801 NE 123 STREET,  
SUITE 314  
MIAMI, FL 33181 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

FLEURIMOND, MCKENZIE  
16651 NE 18TH AVENUE  
#88  
NORTH MIAMI BEACH, FL 33162 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 AR  
Name FLEURIMOND, MCKENZIE  
Address 16651 NE 18TH AVENUE  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title MGR  
Name FLEURIMOND, STRAUSSIANA  
Address 16651 NE 18TH AVENUE  
City-State-Zip: NORTH MIAMI BEACH FL 33162

*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:** MCKENZIE FLEURIMOND

**REGISTERED AGENT**

**05/01/2023**

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

\_\_\_\_\_  
Date