

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000340094

**Entity Name:** THE SOBER PAD LLC

**Current Principal Place of Business:**

4708 ALLIGATOR FLAG CIRCLE  
WEST MELBOURNE, FL 32904

**Current Mailing Address:**

4708 ALLIGATOR FLAG CIRCLE  
WEST MELBOURNE, FL 32904

**FEI Number:** 87-2153663

**Certificate of Status Desired:** No

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

DAVIS, RACHEL  
4708 ALLIGATOR FLAG CIRCLE  
WEST MELBOURNE, FL 32904 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	Title	MGR
Name	DAVIS, RACHEL	Name	DAVIS, WILLIAM D JR
Address	4708 ALLIGATOR FLAG CIRCLE	Address	4708 ALLIGATOR FLAG CIRCLE
City-State-Zip:	WEST MELBOURNE FL 32904	City-State-Zip:	WEST MELBOURNE FL 32904

*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:** RACHEL DAVIS

MEMBER

01/24/2022

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

\_\_\_\_\_ Date