

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000389101

**Entity Name:** ALLEGIANT CONSULTING LLC

**Current Principal Place of Business:**

3607 NORTH MONROE STREET  
#180310  
TALLAHASSEE, FL 32318

**Current Mailing Address:**

3607 NORTH MONROE STREET  
#180310  
TALLAHASSEE, FL 32318

**FEI Number:** 35-2730144

**Certificate of Status Desired:** No

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

CLARK, ASHLEY N  
3607 NORTH MONROE STREET  
#180310  
TALLAHASSEE, FL 32318 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            AMBR  
Name            CLARK, ASHLEY N  
Address        3607 NORTH MONROE STREET,  
                  #180310  
City-State-Zip: TALLAHASSEE FL 32318

*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:** ASHLEY CLARK

**MANAGING MEMBER**

**01/08/2022**

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

\_\_\_\_\_  
Date