

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000435891

Entity Name: S.M.A.T. SINGLE MOTHERS ALLIANCE TEAM LLC

Current Principal Place of Business:

2567 BEAVERBROOK PLACE
JACKSONVILLE, FL 32254

Current Mailing Address:

2567 BEAVERBROOK PLACE
JACKSONVILLE, FL 32254 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPERS, LATRELLE S
2567 BEAVERBROOK PLACE
JACKSONVILLE, FL 32254 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 CAPERS, LATRELLE S
Address 3043 NOLAN ST.
City-State-Zip: JACKSONVILLE FL 32254

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: LATRELLE CAPERS

MGR

04/29/2022

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date