

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000188221

**Entity Name:** EXPERT WITNESS PRO LLC

**Current Principal Place of Business:**

1617 S. TUTTLE STREET  
SUITE 3  
SARASOTA, FL 34239

**Current Mailing Address:**

1617 S. TUTTLE STREET  
SUITE 3  
SARASOTA, FL 34239

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

IDO HOLDINGS LLC  
1617 S. TUTTLE AVE  
SUITE 3  
SARASOTA, FL 34239 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 DR.  
Name LIM, RENELLE  
Address 1617 S. TUTTLE STREET, SUITE 3  
City-State-Zip: SARASOTA FL 34239

Title DR.  
Name ILYA, LIM  
Address 1617 S. TUTTLE STREET, SUITE 3  
City-State-Zip: SARASOTA FL 34239

*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:** RENELLE LIM

**04/09/2024**

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

\_\_\_\_\_  
Date