

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000259603

**Entity Name:** SMILE CUSTOMER SERVICES LLC

**Current Principal Place of Business:**

2155 MORGAN WIELAND LN APT.303  
LAKELAND, FL 33813

**Current Mailing Address:**

2155 MORGAN WIELAND LN APT.303  
LAKELAND, FL 33813

**FEI Number:** 61-2039424

**Certificate of Status Desired:** No

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

BMCE PROFESSIONAL SERVICES LLC  
5122 HOOK HOLLOW CIR  
ORLANDO, FL 32837 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 VERACIERTA JIMENEZ, MADELEINE  
Address 2155 MORGAN WIELAND LN APT 303  
City-State-Zip: LAKELAND FL 33813

*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:** MADELEINE VERACIERTA JIMENEZ

MGR

04/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date