

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000264728

Entity Name: SNAP CARES LLC

Current Principal Place of Business:

6526 SOUTH KANNER HWY
SUITE 351
STUART, FL 34997

Current Mailing Address:

6526 SOUTH KANNER HWY
SUITE 351
STUART, FL 34997 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GIBBS, KENNY
6526 SOUTH KANNER HWY
SUITE 351
STUART, FL 34997 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 GIBBS, KENNY
Address 6526 SOUTH KANNER HWY
City-State-Zip: STUART FL 34997

Title CEO
Name GIBBS, RACHELLE
Address 6526 SOUTH KANNER HWY
City-State-Zip: STUART FL 34997

Title CFO
Name HAGAN, GARETT
Address 6526 SOUTH KANNER HWY
City-State-Zip: STUART FL 34997

Title CTO
Name LINARES, PEDRO
Address 6526 SOUTH KANNER HWY
City-State-Zip: STUART FL 34997

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: GARETT HAGAN

MGR

04/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date