

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000329836

**Entity Name:** TOOL TIME TRAE LLC

**Current Principal Place of Business:**

5631 NW 70TH ST  
CHIEFLAND, FL 32626

**Current Mailing Address:**

5631 NW 70TH ST  
CHIEFLAND, FL 32626 US

**FEI Number: 88-3013134**

**Certificate of Status Desired:** No

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

SMITH, TRAE  
5631 NW 70TH ST  
CHIEFLAND, FL 32626 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           MANAGING MEMBER  
Name           SMITH, TRAE AUSTIN  
Address        5631 NW 70TH ST  
City-State-Zip: CHIEFLAND FL 32626

*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: TRAE A. SMITH**

**MANAGING MEMBER**

**06/18/2025**

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

\_\_\_\_\_  
Date