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: DAVID H SCAFF JR

Electronic Signature of Signing Authorized Person(s) Detail

# 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000341593

## Entity Name: SCAFF PROFESSIONAL SERVICES LLC

#### **Current Principal Place of Business:**

328 PURITAN ROAD WEST PALM BEACH, FL 33405

## **Current Mailing Address:**

480 HIBISCUS ST APT 443 WEST PALM BEACH. FL 33401 US

# FEI Number: 88-3533155

## Name and Address of Current Registered Agent:

SCAFF, DAVID JR 328 PURITAN ROAD WEST PALM BEACH, FL 33405 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

## Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	SCAFF, DAVID JR	Name	SCAFF, EMMA
Address	480 HIBISCUS ST APT 443	Address	480 HIBISCUS ST APT 443
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401

MGR

FILED Mar 20, 2025 Secretary of State 0405969762CC

Date

Certificate of Status Desired: No

Date

03/20/2025