

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000375093

**Entity Name:** SHAWN TECHNOLOGY SOLUTIONS LLC

**Current Principal Place of Business:**

15310 AMBERLY DR  
SUITE 250  
TAMPA, FL 33647

**Current Mailing Address:**

15310 AMBERLY DR  
SUITE 250  
TAMPA, FL 33647 US

**FEI Number:** 88-4014700

**Certificate of Status Desired:** Yes

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

SANE, MEENAKSHI  
19227 MOSSY PINE DR  
TAMPA, FL 33647 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            AMBR  
Name            SANE, MEENAKSHI  
Address        15310 AMBERLY DR  
                  SUITE 250  
City-State-Zip: TAMPA FL 33647

*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:** MEENAKSHI SANE

AMBR

04/16/2025

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

\_\_\_\_\_  
Date