

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000029167

**Entity Name:** SHADESMARTCONS, LLC

**Current Principal Place of Business:**

138 N. MYRTLE DRIVE  
UNIT 123  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

138 N. MYRTLE DRIVE  
UNIT 123  
SANTA ROSA BEACH, FL 32459 US

**FEI Number:** 92-2031094

**Certificate of Status Desired:** Yes

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

MCNEESE, RICHARD S  
36468 EMERALD COAST PKY.  
SUITE 1201  
DESTIN, FL 32541 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            DOGRUOGULLARI, FAKIR S  
Address        138 N. MYRTLE DRIVE UNIT 123  
City-State-Zip: SANTA ROSA BEACH FL 32459

*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:** FAKIR S DOGRUOGULLARI

**OWNER**

**03/25/2024**

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

\_\_\_\_\_  
Date