

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000123836

**Entity Name:** SHDZ SOLUTIONS PROVIDERS LLC

**Current Principal Place of Business:**

2212 NW 91ST STREET  
#1191  
MIAMI, FL 33147

**Current Mailing Address:**

2212 NW 91ST STREET  
#1191  
MIAMI, FL 33147 US

**FEI Number:** 92-3041441

**Certificate of Status Desired:** Yes

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

HERNANDEZ, SIMON J  
108 HARRISON AVE EXT  
#2H  
SOUTH GLENS FALLS, FL 12803 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 HERNANDEZ, SIMON J  
Address 108 HARRISON AVE EXT  
#2H  
City-State-Zip: SOUTH GLENS FALLS NY 12803

*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:** SIMON HERNANDEZ

**MANAGER**

**01/10/2024**

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

\_\_\_\_\_  
Date