## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000526807

Entity Name: SKILLFUL SEDATIONS LLC

**Current Principal Place of Business:** 

7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702

**Current Mailing Address:** 

7901 4TH ST N STE 300

ST. PETERSBURG, FL 33702 US

FEI Number: 93-4682894 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NORTHWEST REGISTERED AGENT LLC 7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702 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

FILED Mar 10, 2024

**Secretary of State** 

6860977574CC

## Authorized Person(s) Detail:

Title CEO

Name WALLACE, GABRIELLE Address 7995 NW 20TH ST

City-State-Zip: PEMBROKE PINES FL 33024

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: GABRIELLE WALLACE

03/10/2024