

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000385390

**Entity Name:** SERVIWISE LLC

**Current Principal Place of Business:**

524 CAPE COD LN  
103  
ALTAMONTE, FL 32714

**Current Mailing Address:**

524 CAPE COD LN  
103  
ALTAMONTE, FL 32714

**FEI Number:** 35-2869055

**Certificate of Status Desired:** Yes

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

HERRERA, RONNY SR  
524 CAPE COD LN  
103  
ALTAMONTE SPRINGS, FL 32714 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 HERRERA, RONNY SR  
Address 524 CAPE COD LN  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

*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:** RONNY HERRERA

04/09/2025

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

\_\_\_\_\_  
Date