

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000404896

**Entity Name:** TAMPA 24-7 MOBILE NOTARY LLC

**Current Principal Place of Business:**

867 W BLOOMINGDALE AVE  
#7102  
BRANDON, FL 33508

**Current Mailing Address:**

867 W BLOOMINGDALE AVE  
#7102  
BRANDON, FL 33508 UN

**FEI Number:** 83-3269010

**Certificate of Status Desired:** No

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

COSTA, ANGELIQUE  
867 W BLOOMINGDALE AVE  
#7102  
BRANDON, FL 33508 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 COSTA, ANGELIQUE  
Address 867 W BLOOMINGDALE AVE, #7102  
City-State-Zip: BRANDON FL 33508

*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:** ANGELIQUE T COSTA

**PRESIDENT**

**04/25/2024**

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

\_\_\_\_\_  
Date