

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000014072

**Entity Name:** PAWS ONE, LLC

**Current Principal Place of Business:**

520 MOUNTAIN LAKE CUTOFF RD.  
LAKE WALES, FL 33859

**Current Mailing Address:**

520 MOUNTAIN LAKE CUTOFF RD.  
LAKE WALES, FL 33859

**FEI Number:** 04-3691003

**Certificate of Status Desired:** No

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

SCHOTMAN, THOMAS B DV  
520 MOUNTAIN LAKE CUTOFF RD.  
LAKE WALES, FL 33859 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:** THOMAS B SCHOTMAN DVM

04/11/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            OWNER  
Name            SCHOTMAN, THOMAS B  
Address        520 MOUNTAIN LAKE CUTOFF RD.  
City-State-Zip: LAKE WALES FL 33859

*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:** THOMAS SCHOTMAN

OWNER

04/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date