

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000015962

**Entity Name:** SHERRI & JOHN, LLC

**Current Principal Place of Business:**

C/O ADVANTAGE PLASTICS OF NEW YORK, INC.  
654 POST AVENUE S.W.  
WINTER HAVEN, FL 33880

**Current Mailing Address:**

C/O ADVANTAGE PLASTICS OF NEW YORK, INC.  
654 POST AVENUE S.W.  
WINTER HAVEN, FL 33880

**FEI Number:** 09-8645636

**Certificate of Status Desired:** No

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

SALVA, JOHN J  
244 SANTA ROSA DRIVE  
WINTER HAVEN, FL 33884 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 MGRM  
Name SALVA, SHERRI  
Address 244 SANTA ROSA DRIVE  
City-State-Zip: WINTER HAVEN FL 33884

*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:** SHERRI SALVA

**PARTNER**

**05/15/2019**

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

\_\_\_\_\_  
Date