

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000195

Entity Name: SURVIVOR LLC

Current Principal Place of Business:

10751 MAPLE CREEK DRIVE
STE 104
TRINITY, FL 34655

Current Mailing Address:

P.O. BOX 7743
WESLEY CHAPEL, FL 33545 US

FEI Number: 20-8911742

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HERZ, TAMARA
10751 MAPLE CREEK DRIVE
STE104
TRINITY, FL 34655 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 PRESIDENT
Name HERZ, TAMARA J
Address P.O. BOX 7743
City-State-Zip: WESLEY CHAPEL FL 33545

Title MGRM
Name HERZ, RALPH R
Address P.O. BOX 7743
City-State-Zip: WESLEY CHAPEL FL 33545

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: TAMARA HERZ

PRESIDENT

03/15/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date