FEI Number: 26-2858377		Certificate of Status Desired: No		
Name and Address of Current Registered Agent:				
ALTMAN, SHAN 5151 E. MADIS DAVIE, FL 333	ON LAKES CIRCLE			
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	: SHANA G. ALTMAN			01/22/2020
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	MGRM	
Name	ALTMAN, SHARON F	Name	ALTMAN, JEFFREY DR	
Address	48 MOUNTAIN BROOK RD.	Address	5151 MADISON LAKES CIR E	
City-State-Zip:	WEST HARTFORD CT 06117	City-State-Zip:	DAVIE FL 33328	
Title	MANAGER			
Name	ALTMAN, SHANA G ESQ.			
Address	48 MOUNTAIN BROOK RD			
City-State-Zip:	WEST HARTFORD CT 06117			

Entity Name: SHARAFL, LLC

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

5151 E. MADISON LAKES CIRCLE DAVIE, FL 33328

DOCUMENT# L08000061830

Current Mailing Address:

5151 E. MADISON LAKES CIRCLE DAVIE. FL 33328 US

FEI Number: 26-2858377

N

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: SHARON F ALTMAN

MANAGER

01/22/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Jan 22, 2020 Secretary of State 5644341952CC