

2018 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000061830

Entity Name: SHARAFL, LLC

Current Principal Place of Business:

5151 E. MADISON LAKES CIRCLE
DAVIE, FL 33328

Current Mailing Address:

5151 E. MADISON LAKES CIRCLE
DAVIE, FL 33328 US

FEI Number: 26-2858377

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALTMAN, SHANA G ESQ.
5151 E. MADISON LAKES CIRCLE
DAVIE, FL 33328 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: SHANA G. ALTMAN

06/26/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name ALTMAN, SHARON F
Address 48 MOUNTAIN BROOK RD.
City-State-Zip: WEST HARTFORD CT 06117

Title MGRM
Name ALTMAN, JEFFREY DR
Address 5151 MADISON LAKES CIR E
City-State-Zip: DAVIE FL 33328

Title MGRM
Name ALTMAN, RACHEL S
Address 48 MOUNTAIN BROOK RD.
City-State-Zip: WEST HARTFORD CT 06117

Title MANAGER
Name ALTMAN, SHANA G ESQ.
Address 48 MOUNTAIN BROOK RD
City-State-Zip: WEST HARTFORD CT 06117

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

06/26/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date