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: JONATHAN S LINFORTH

Electronic Signature of Signing Authorized Person(s) Detail

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

STEPHENS, SHARON K 25641 MONROE STREET ASTATULA, FL 34705 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

Authorized Person(s) Detail :

Title	MGR	Title	PART
Name	STEPHENS, SHARON K	Name	LINFORTH, JONATHAN S
Address	267 EAST CHERRY STREET	Address	115 E CEDAR ST
City-State-Zip:	GROVELAND FL 34736	City-State-Zip:	HOWEY IN THE HILLS FL 34737

MANAGER

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L11000061555

Entity Name: SHARON K. STEPHENS, LLC

Current Principal Place of Business:

25641 MONROE STREET ASTATULA FL 34705

Current Mailing Address:

267 EAST CHERRY STREET GROVELAND. FL 34736 US

Certificate of Status Desired: No

01/28/2019

Date

FILED Jan 28, 2019 Secretary of State 8637495967CC

Date