

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000063212

Entity Name: ARCHER FARMS LLC

Current Principal Place of Business:

16525 SW 5TH PLACE
NEWBERRY, FL 32669

Current Mailing Address:

PO BOX 1293
ARCHER, FL 32618 US

FEI Number: 45-2445456

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EXLER, SHARLEEN
16525 SW 5TH PL
NEWBERRY, FL 32669 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 MGR
Name EXLER, SHARLEEN
Address PO BOX 1293
City-State-Zip: ARCHER FL 32618

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: SHARLEEN EXLER

MGR

03/13/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date