

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000052828

**Entity Name:** LABOO' ENTERTAINMENT LLC

**FILED**  
**Apr 14, 2019**  
**Secretary of State**  
**6031910932CC**

**Current Principal Place of Business:**

11034 SANTA FE ST N  
OFFICE SUITE  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

11034 SANTA FE ST N  
OFFICE SUITE  
JACKSONVILLE, FL 32246 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

SUTHERLAND, J JR  
11034 SANTA FE ST N  
OFFICE SUITE  
JACKSONVILLE, FL 32246 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 SUTHERLAND, J JR  
Address 11034 SANTA FE ST N  
City-State-Zip: JACKSONVILLE FL 32246

Title SECRETARY  
Name SUTHERLAND, PATRICIA  
Address 11034 SANTA FE STREET NORTH  
City-State-Zip: JACKSONVILLE FL 32246

Title AUTHORIZED MEMBER  
Name SUTHERLAND, JUSTUS  
Address 11034 SANTA FE STREET NORTH  
City-State-Zip: JACKSONVILLE FL 32246

Title AUTHORIZED MEMBER  
Name SUTHERLAND, BRIANA  
Address 11034 SANTA FE STREET NORTH  
City-State-Zip: JACKSONVILLE FL 32246

*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: PATRICIA SUTHERLAND**

**SECRETARY**

**04/14/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date