## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000114568

Entity Name: GREY SHADOW LLC

**Current Principal Place of Business:** 

5514 CARMACK RD TAMPA, FL 33610

## **Current Mailing Address:**

5514 CARMACK RD TAMPA. FL 33610

FEI Number: 46-3427772 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

WASIELEWSKI, THOMAS 5514 CARMACK RD TAMPA, FL 33610 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

**FILED** Jan 22, 2019

**Secretary of State** 

9074373498CC

## Authorized Person(s) Detail:

Title **MMGR** 

Name WASIELEWSKI, THOMAS

Address 9428 EDDINGS RD

City-State-Zip: ODESSA FL 33556

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.

Electronic Signature of Signing Authorized Person(s) Detail