# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000118527

Entity Name: BAY AREA NIGHTLIFE STAFFING ""LLC"

## **Current Principal Place of Business:**

1353 SPRINGDALE STREET CLEARWATER, FL 33755

# **Current Mailing Address:**

1353 SPRINGDALE STREET CLEARWATER, FL 33755 US

# FEI Number: 46-3445400

## Name and Address of Current Registered Agent:

SANDERS, DEMETREUS E SR. 1353 SPRINGDALE STREET CLEARWATER, FL 33755 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	MGRM	Title	MGRM
Name	SANDERS, DEMETREUS E SR.	Name	LYMUS-SANDERS, EILEEN B
Address	1353 SPRINGDALE STREET	Address	1353 SPRINGDALE STREET
City-State-Zip:	CLEARWATER FL 33755	City-State-Zip:	CLEARWATER FL 33755

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: EILEEN LYMUS-SANDERS

MGRM

05/01/2018 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED May 01, 2018 Secretary of State CC1430789149

Date

Certificate of Status Desired: Yes