## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000161735

Entity Name: EPITOMIE LLC

inity Name. Li ITOMIL LLO

**Current Principal Place of Business:** 

8369 NW 66 ST #9098 MILAM DAIRY, FL 33195

**Current Mailing Address:** 

4283 EXPRESS LANE, SUITE 216-360 SARASOTA, FL 33195 US

FEI Number: 80-0962020 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC. 17888 67TH COURT NORTH SUITE 400 LOXAHATCHEE, FL 33470 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: MELISSA GUBLER ON BEHALF OF INCORP SERVICES, INC. 03/20/2019

Electronic Signature of Registered Agent

Date

FILED Mar 20, 2019

**Secretary of State** 

2821606662CC

Authorized Person(s) Detail:

Title MANAGER
Name LOI, STEVEN

SIGNATURE: STEVEN LOI

Address 8369 NW 66 ST #9098 City-State-Zip: MILAM DAIRY FL 33195

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

**MANAGER** 

03/20/2019

Date