

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000044627

**Entity Name:** COWLICK FARMS LLC

**Current Principal Place of Business:**

40 SECKAR RD  
WILLINGTON, CT 06279

**Current Mailing Address:**

40 SECKAR RD  
WILLINGTON, CT 06279 US

**FEI Number:** 46-5124712

**Certificate of Status Desired:** No

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

LEE, DANIEL R  
109 SE PRICE CREEK LOOP  
LAKE CITY, FL 32055 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            AMBR  
Name            LEE, VICTORIA J  
Address        40 SECKAR RD  
City-State-Zip: WILLINGTON CT 06279

*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:** VICTORIA J LEE

**AGENT**

**04/23/2018**

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

\_\_\_\_\_  
Date