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. 02/15/2017 SIGNATURE: DEE A JACOBS AUTHORIZED MEMBER

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

Electronic Signature of Signing Authorized Person(s) Detail

City-State-Zip: LEHIGH ACRES FL 33971

5513 8TH ST W

LIGUORI, JUSTIN ALAN

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	E DEE A JACOBS			02/15/2017
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AMBR	Title	MANAGING MEMBER	
Name	JACOBS, DEE A	Name	JACOBS, BRUCE HOWARD	
Address	823 UMBER DR	Address	5513 8TH STREET W	
City-State-Zip:	FORT MYERS FL 33913	City-State-Zip:	#1 & #2 LEHIGH ACRES FL 33971	
Title	MANAGING MEMBER			

Name and Address of Current Registered Agent:

#1 & #2 LEHIGH ACRES, FL 33971

Current Mailing Address:

5513 8TH ST W 1

LEHIGH ACRES, FL 33971 US

JACOBS, DEE A 5513 8TH ST W

#1

Name

Address

LEHIGH ACRES, FL 33971 US

FEI Number: 46-5616383

Entity Name: GUNSMOKE AND LEAD LLC

Current Principal Place of Business:

5513 8TH STREET W

DOCUMENT# L14000074340

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Secretary of State

Certificate of Status Desired: Yes

FILED Feb 15, 2017

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