

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000113094

Entity Name: MY LEAP OF FAITH LLC

Current Principal Place of Business:

1729 SW OAKWATER POINTE
PALM CITY, FL 34990

Current Mailing Address:

1729 SW OAKWATER POINTE
PALM CITY, FL 34990 US

FEI Number: 47-1359533

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DELVALLE, MAYCE
1729 SW OAKWATER PT
PALM CITY, FL 34990 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 MGR
Name DELVALLE, MAYCE
Address 1729 SW OAKWATER PT
City-State-Zip: PALM CITY FL 34990

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: MAYCE DELVALLE

MGR

02/11/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date