

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000118835

**Entity Name:** 9150 SOUTHMONT COVE #302, LLC

**Current Principal Place of Business:**

9150 SOUTHMONT COVE  
#302  
FORT MYERS, FL 33908

**Current Mailing Address:**

C/O MICHAEL T. SCHMITZ, 3000 N. 14TH ST  
SUITE 3C  
BISMARCK, ND 58503

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

HOLTZ MAHSHIE DECOSTA  
1560 MATTHEW DRIVE  
SUITE E  
FORT MYERS, FL 33907 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 M.SCHMITZ AS TR CHEZA EMPLOYEE  
SHARE PLAN  
Address 3000 N. 14TH STREET, SUITE 3C  
City-State-Zip: BISMARCK ND 58503

*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:** MICHAEL T. SCHMITZ

MGR

04/30/2018

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

\_\_\_\_\_  
Date