	47-1950279	Certificate of Status Desired: No
Name and Address of Current Registered Agent:		
RICHTER, DANIEL 2940 NE 164TH STREET NORTH MIAMI BEACH, FL 33160 US		
i ne anove named e	ntity submits this statement for the purpose of changing its registered office	ce or redistered adent. Or both in the State of Florida
		ee er regietered agerig er bean, in the etate er riendar
	DANIEL RICHTER	02/07/2019
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
SIGNATURE:	DANIEL RICHTER	02/07/2019
SIGNATURE:	DANIEL RICHTER Electronic Signature of Registered Agent	02/07/2019

Address

217 PORT ST CLAIRE ARANSAS PASS, TX 78336

DOCUMENT# L14000150060

Entity Name: SHADROW, LLC

Current Principal Place of Business:

Current Mailing Address:

217 PORT ST CLAIRE ARANSAS PASS, TX 78336 US

FEI Number: 47-1950279

Address

N

217 PORT ST CLAIRE

City-State-Zip: ARANSAS PASS TX 78336

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: DANIEL RICHTER

AMBR

02/07/2019 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 07, 2019 Secretary of State 3707389440CC

Cartificate of Status Desired: No

217 PORT ST CLAIRE

City-State-Zip: ARANSAS PASS TX 78336

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT