# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L15000030665

Entity Name: 2 MY DESTINY, LLC

## **Current Principal Place of Business:**

5004 E FOWLER AVE SUITE C #335 TAMPA, FL 33617

## **Current Mailing Address:**

5004 E FOWLER AVE SUITE C #335 TAMPA FL 33617 US

# FEI Number: 82-1517843

### Name and Address of Current Registered Agent:

REID, LONERYL 3501 LINDELL AVENUE TAMPA, FL 33610 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: LONERYL REID

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Title	MGR
Name	REID, LONERYL
Address	3501 LINDELL AVENUE
City-State-Zip:	TAMPA FL 33610

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: LONERYL REID

MANAGER

04/27/2018 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 27, 2018 Secretary of State CC7436637542

Certificate of Status Desired: No

04/27/2018 Date