#### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000063471

**Entity Name: 2 EXTREME LIMITED LIABILITY COMPANY** 

FILED
Mar 30, 2019
Secretary of State
9593788626CC

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

3020 PINECONE DRIVE APT #203 KISSIMMEE, FL 34741

## **Current Mailing Address:**

P O BOX 450462 KISSIMMEE, FL 34745 US

FEI Number: 47-3702099 Certificate of Status Desired: No

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

TAYLOR, EDISON X 3020 PINECONE DRIVE APT#203 KISSIMMEE, FL 34741 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 MNGR

Name TAYLOR, EDISON X
Address 3020 PINECONE DRIVE

APT #203

City-State-Zip: KISSIMMEE FL 34741

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: EDISON X. TAYLOR

Electronic Signature of Signing Authorized Person(s) Detail

**OWNER** 

03/30/2019

Date