

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000077198

**Entity Name:** SHARON LEVY PHOTO&DESIGN LLC

**Current Principal Place of Business:**

715 NE 191 TERRACE  
MIAMI, FL 33179

**Current Mailing Address:**

715 NE 191 TERRACE  
MIAMI, FL 33179 US

**FEI Number:** 47-3926430

**Certificate of Status Desired:** No

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

LEVY, SHARON  
715 NE 191 TERRACE  
MIAMI, FL 33179 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:** SHARON LEVY

06/09/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	LEVY, SHARON	Name	WALZER, CARLOS E
Address	715 NE 191 TERRACE	Address	715 NE 191 TERRACE
City-State-Zip:	MIAMI FL 33179	City-State-Zip:	MIAMI FL 33179

*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:** SHARON LEVY

MANAGER

06/09/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date