## **2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000096858
Entity Name: JASH CPW LLC

**Current Principal Place of Business:** 

640 NORTH ISLAND DRIVE GOLDEN BEACH. FL 33160

**Current Mailing Address:** 

640 NORTH ISLAND DRIVE GOLDEN BEACH, FL 33160 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TARTELL, JODI 640 NORTH ISLAND RIVE GOLDEN BEACH, FL 33160 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: JODI TARTELL 03/16/2020

Electronic Signature of Registered Agent

Date

FILED Mar 16, 2020

**Secretary of State** 

2651302689CC

Authorized Person(s) Detail:

SIGNATURE: JODI TARTELL

Title AMBR

Name TARTELL, JODI

Address 640 NORTH ISLAND DRIVE
City-State-Zip: GOLDEN BEACH FL 33160

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.

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

03/16/2020

Date