

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000105690

**Entity Name:** BOL ELCON, LLC

**Current Principal Place of Business:**

459 WALLS WAY  
OSPREY, FL 34229

**Current Mailing Address:**

459 WALLS WAY  
OSPREY, FL 34229 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

VOTRUBOVA, LINDA  
459 WALLS WAY  
OSPREY, FL 34229 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:** VOTRUBOVA LINDA

04/30/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name JECMIK, DAVID  
Address 459 WALLS WAY  
City-State-Zip: OSPREY FL 34229

Title AMBR  
Name SKUHERSKA, IVETA  
Address 459 WALLS WAY  
City-State-Zip: OSPREY FL 34229

Title AMBR  
Name TRAVNICEK, IVO  
Address 330 S PINEAPPLE AVE.  
City-State-Zip: SARASOTA FL 34236

*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:** IVETA SKUHERSKA

AMBR

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date