

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000127388

Entity Name: NEPTUNE NURSERY LLC

Current Principal Place of Business:

5164 SW CITRUS BLVD.
PALM CITY, FL 34990

Current Mailing Address:

6526 S KANNER HWY
SUITE 283
STUART, FL 34997 US

FEI Number: 47-4646815

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DE LA ROSA, MAITE
6526 S KANNER HWY
SUITE 283
STUART, FL 34997 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 MGR
Name DE LA ROSA, MAITE
Address 6526 S KANNER HWY
SUITE 283
City-State-Zip: STUART FL 34997

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: MAITE DE LA ROSA

MGR

03/11/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date