

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000180383

Entity Name: EMERALD CITY SAFEROOMS LLC

Current Principal Place of Business:

510 NW 159TH LANE
PEMBROKE PINES, FL 33028

Current Mailing Address:

510 NW 159TH LANE
PEMBROKE PINES, FL 33028 US

FEI Number: 47-5390478

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DE LEON, PATRICIA
510 NW 159TH LANE
PEMBROKE PINES, FL 33028 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 AMBR
Name DE LEON, PATRICIA
Address 510 NW 159TH LANE
City-State-Zip: PEMBROKE PINES FL 33028

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: PATRICIA DE LEON

MANAGING MEMBER

04/15/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date