## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000156371

Entity Name: MOM WITH A SAW, LLC

**Current Principal Place of Business:** 

7980 ROMA DUNE DR WESLEY CHAPEL, FL 33545

**Current Mailing Address:** 

7980 ROMA DUNE DR

WESLEY CHAPEL. FL 33545 US

FEI Number: 81-3651647 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, NICKOLE 7980 ROMA DUNE DR WESLEY CHAPEL, FL 33545 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: NICKOLE DAVIS 02/20/2019

Electronic Signature of Registered Agent

Date

FILED Feb 20, 2019

**Secretary of State** 

4882472247CC

Authorized Person(s) Detail:

Title MGR Title AMBR

NameDAVIS, NICKOLENameDAVIS, LASCELLES NAddress7980 ROMA DUNE DRAddress7980 ROMA DUNE DR

City-State-Zip: WESLEY CHAPEL FL 33545 City-State-Zip: WESLEY CHAPEL FL 33545

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.

**MGR** 

SIGNATURE: NICKOLE DAVIS