

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000161070

**Entity Name:** LEAH ESCOTO BOOKKEEPING, LLC

**Current Principal Place of Business:**

1713 CHATHAM CIRCLE  
APOPKA, FL 32703-7316

**Current Mailing Address:**

1713 CHATHAM CIRCLE  
APOPKA, FL 32703-7316 US

**FEI Number: 81-3801834**

**Certificate of Status Desired: No**

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

ESCOTO, LEAH  
1713 CHATHAM CIRCLE  
APOPKA, FL 32703-7316 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 ESCOTO, LEAH  
Address 1713 CHATHAM CIRCLE  
City-State-Zip: APOPKA FL 32703-7316

Title AMBR  
Name ESCOTO, CRISTIAN  
Address 1713 CHATHAM CIRCLE  
City-State-Zip: APOPKA FL 32703-7316

Title AMBR  
Name ESCOTO, MATEO  
Address 1713 CHATHAM CIRCLE  
City-State-Zip: APOPKA FL 32703-7316

Title AMBR  
Name ESCOTO, SERGIO  
Address 1713 CHATHAM CIRCLE  
City-State-Zip: APOPKA FL 32703-7316

*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: LEAH ESCOTO**

**OWNER**

**01/13/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date