

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000170960

Entity Name: FALLEN OAK LLC

Current Principal Place of Business:

3901 BOB EVANS DR.
VALRICO, FL 33596

Current Mailing Address:

3901 BOB EVANS DR.
VALRICO, FL 33596

FEI Number: 81-5085741

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FEHRENBACHER, BRIAN
3901 BOB EVANS DR.
VALRICO, FL 33596 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	Title	AUTHORIZED MEMBER
Name	FEHRENBACHER, BRIAN	Name	FEHRENBACHER, SHELLEY
Address	3901 BOB EVANS DR.	Address	3901 BOB EVANS DR.
City-State-Zip:	VALRICO FL 33596	City-State-Zip:	VALRICO FL 33596

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: BRIAN FEHRENBACHER

OWNER

09/21/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date