

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000174589

**Entity Name:** SPARKLES OF METROPICA, LLC

**Current Principal Place of Business:**

1071 S. CLARKE ROAD  
OCOE, FL 34761

**Current Mailing Address:**

1071 S. CLARKE ROAD  
OCOE, FL 34761 US

**FEI Number:** 36-4850551

**Certificate of Status Desired:** No

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

WEATHERFORD, WILLIAM P JR  
1150 LOUISIANA AVENUE  
SUITE 4  
WINTER PARK, FL 32789 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	Title	MGR
Name	M, H	Name	M, G
Address	1071 S. CLARKE ROAD	Address	1071 S. CLARKE ROAD
City-State-Zip:	OCOE FL 34761	City-State-Zip:	OCOE FL 34761

*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:** MG

**MANAGING PARTNER**

**04/02/2019**

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

\_\_\_\_\_  
Date