

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000190706

Entity Name: BOX DROP MATTRESS ORLANDO

Current Principal Place of Business:

379 E BROADWAY ST
SUITE 1002
OVIEDO, FL 32765

Current Mailing Address:

931 BIGHORN ST.
OVIEDO, FL 32765

FEI Number: 81-3834977

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DORN, BRIAN
931 BIGHORN ST.
OVIEDO, FL 32765 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	AR
Name	DORN, BRIAN	Name	DORN, SUMMER
Address	931 BIGHORN ST.	Address	931 BIGHORN ST.
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	OVIEDO FL 32765

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: SUMMER DORN

AR

04/03/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date