

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000136672

Entity Name: CASSIE'S CAKERY, LLC

Current Principal Place of Business:

EDEN MICHELE SALON
1215 NW 14TH AVE
GAINESVILLE, FL 32601

Current Mailing Address:

P.O. BOX 140502
GAINESVILLE, FL 32614

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EDEN MICHELE SALON
1215 NW 14TH AVE
GAINESVILLE, FL 32601 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 JENKINS, CASSANDRA R
Address P.O. BOX 140502
City-State-Zip: GAINESVILLE FL 32614

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: CASSANDRA R. JENKINS

MANAGER

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date