

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000207831

Entity Name: RETURN TO NATURE LLC

Current Principal Place of Business:

42725 W ALTOONA RD
ALTOONA, FL 32702

Current Mailing Address:

42725 W ALTOONA RD
ALTOONA, FL 32702

FEI Number: 37-1871788

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

QUIROGA ZABALA, BAROX ZERANKUA
42725 W ALTOONA RD
ALTOONA, FL 32702 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	AP	Title	AP
Name	QUIROGA, FRANCISCO	Name	QUIROGA ZABALA, ANDROX ZERAWI
Address	42725 W ALTOONA RD	Address	42725 W ALTOONA RD
City-State-Zip:	ALTOONA FL 32702	City-State-Zip:	ALTOONA FL 32702
Title	AP	Title	AP
Name	QUIROGA ZABALA, BAROX ZERANKUA	Name	BERNAL, NASLY
Address	42725 W ALTOONA RD	Address	42725 W ALTOONA RD
City-State-Zip:	ALTOONA FL 32702	City-State-Zip:	ALTOONA FL 32702
Title	AP	Title	AP
Name	GARCES, MARY LUZ	Name	BOTERO, CLARA P
Address	42725 W ALTOONA RD	Address	42725 W ALTOONA RD
City-State-Zip:	ALTOONA FL 32702	City-State-Zip:	ALTOONA FL 32702

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: CLARA BOTERO

MANAGER

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date