## 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.

PRESIDENT

SIGNATURE: SHERRON PARRISH

Electronic Signature of Signing Authorized Person(s) Detail

# 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L17000248663

## Entity Name: SAFE PASSAGE EXPORT COMPANY LLC

#### **Current Principal Place of Business:**

6741 PEMBROKE RD PEMBROKE PINES. FL 33023

#### **Current Mailing Address:**

6741 PEMBROKE RD PEMBROKE PINES. FL 33023

## FEI Number: 82-4442772

## Name and Address of Current Registered Agent:

PARRISH, SHERRON 3541 SW 144TH AVE MIRAMAR, FL 33027 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

#### Authorized Person(s) Detail :

Title	AMBR	Title	MGR
Name	PARRISH, SHERRON	Name	PARRISH, CARL D
Address	3541 SW 144TH AVE	Address	3541 SW 144TH AVE
City-State-Zip:	MIRAMAR FL 33027	City-State-Zip:	MIRAMAR FL 33027

Date

Certificate of Status Desired: Yes

FILED Feb 09, 2019 Secretary of State 8741126396CC

> 02/09/2019 Date