

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000024980

Entity Name: PENINSULA LIVING LLC

Current Principal Place of Business:

5960 30TH AVE S
APT 401
GULFPORT, FL 33707

Current Mailing Address:

5960 30TH AVE S
APT 401
GULFPORT, FL 33707 US

FEI Number: 82-4204067

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KIDD, BRIAN P
5960 30TH AVE S
APT 401
GULFPORT, FL 33707 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 MR
Name FLOREZ, LUIS R
Address 5960 30TH AVE S
APT 401
City-State-Zip: GULFPORT FL 33707

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: LUIS R FLOREZ

**AUTHORIZED TO
MANAGE**

03/27/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date