

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000045471

Entity Name: BLISS OF FLORIDA, LLC

Current Principal Place of Business:

324 LAUREL HOLLOW DRIVE
NOKOMIS, FL 34275

Current Mailing Address:

PO BOX 1098
OSPREY, FL 34229

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KRATZ, MARTHA U
324 LAUREL HOLLOW DRIVE
NOKOMIS, FL 34275 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 AMBR
Name KRATZ, CHARLES J
Address 324 LAUREL HOLLOW DRIVE
City-State-Zip: NOKOMIS FL 34275

Title AMBR
Name THOMAS, RODNEY
Address PO BOX 1098
City-State-Zip: OSPREY FL 34229

Title AMBR
Name MARKIEWICZ, KIMBERLY A
Address 324 LAUREL HOLLOW DRIVE
City-State-Zip: NOKOMIS FL 34275

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: KIMBERLY MARKIEWICZ

MANAGER

04/25/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date