

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000051432

Entity Name: KEEPER LAB LLC**Current Principal Place of Business:**1314 SHOREWOOD DR
ORLANDO, FL 32806**Current Mailing Address:**1314 SHOREWOOD DR
ORLANDO, FL 32806 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BANUCHI, FELIX
1314 SHOREWOOD DR
ORLANDO, FL 32806 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	Title	AUTHORIZED MEMBER
Name	BANUCHI, FELIX	Name	BELL, SEAN K
Address	5346 PENWAY DR	Address	1314 SHOREWOOD DR
City-State-Zip:	ORLANDO FL 32814	City-State-Zip:	ORLANDO FL 32806
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	ARBLE, JASON	Name	SNELL, CHARLES
Address	5763 WILLOWBROOK DR	Address	1608 WEBER ST
City-State-Zip:	MORRISON CO 80465	City-State-Zip:	ORLANDO FL 32893

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: FELIX BANUCHI**MANAGER****01/16/2019**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date