

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000065061

**Entity Name:** LMS LIMITLESS L.L.C.

**Current Principal Place of Business:**

430 SW 22ND AVE  
FORT LAUDERDALE, FL 33312

**Current Mailing Address:**

430 SW 22ND AVE  
FORT LAUDERDALE, FL 33312 US

**FEI Number: 82-4849194**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LLEWELLYN, LESLIE  
430 SW 22ND AVE  
FORT LAUDERDALE, FL 33312 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  
Name LLEWELLYN, LESLIE L  
Address 430 SW 22ND AVE  
City-State-Zip: FORT LAUDERDALE FL 33312

Title AP  
Name LLEWELLYN, DARTHUR D  
Address 16 TALCOTT ST., APT 3  
City-State-Zip: MASSENA NY 13662

Title MGR  
Name YOUNG, VANESA T  
Address 430 SW 22ND AVE  
City-State-Zip: FORT LAUDERDALE FL 33312

*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: LLEWELLYN , DARTHUR**

AP

03/24/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date