occo nu Era	S, FL 33912 US			
FEI Number: NOT APPLICABLE			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
COLLINS, KRIS 6900 INTERNA ⁻ FORT MYERS,	ΓΙΟΝΑL CENTER BLVD.			
The above named	l entity submits this statement for the purpose of changing its reg	istered office or regis	tered agent, or both, in the State of Florida.	
	entity submits this statement for the purpose of changing its reg KRISTIN COLLINS	istered office or regis	tered agent, or both, in the State of Florida. 04/26/202	1
		istered office or regis		1
SIGNATURE	RRISTIN COLLINS	istered office or regis	04/26/202	1
SIGNATURE	: KRISTIN COLLINS Electronic Signature of Registered Agent	istered office or regis	04/26/202	1
SIGNATURE	KRISTIN COLLINS Electronic Signature of Registered Agent Person(s) Detail :		04/26/202 Date	<u>1</u>
SIGNATURE Authorized I	KRISTIN COLLINS Electronic Signature of Registered Agent Person(s) Detail : AMBR	Title	04/26/202 Date	<u>1</u>

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000082992

Entity Name: LEROY HOLDINGS OF SWFL, LLC

Current Principal Place of Business:

6900 INTERNATIONAL CENTER BLVD. FORT MYERS. FL 33912

Current Mailing Address:

6900 INTERNATIONAL CENTER BLVD

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: KRISTIN COLLINS

OFFICER

04/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Apr 26, 2021 **Secretary of State** 4086044506CC