## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000122975

Entity Name: SLMR FLORIDA, LLC

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**Current Principal Place of Business:** 

109 WESTPARK DRIVE SUITE 300 BRENTWOOD, TN 37027

**Current Mailing Address:** 

109 WESTPARK DRIVE SUITE 300 BRENTWOOD, TN 37027 US

FEI Number: 83-0684838 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 3030 N. ROCKY POINT DR. STE 150A TAMPA, FL 33607 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

FILED Feb 16, 2019

**Secretary of State** 

8344512238CC

Authorized Person(s) Detail:

Title AMBR Title AMBR

NameHOOPER, JOEL RNameHOOPER, MARY ANNAddress31 FULL MOON LANEAddress31 FULL MOON LANE

City-State-Zip: SANTA ROSA BEACH FL 32459 City-State-Zip: SANTA ROSA BEACH FL 32459

Title AMBR Title AMBR

NameDANIEL, SAMUEL E IIINameDANIEL, ELIZABETH CAddress31 FULL MOON LANEAddress31 FULL MOON LANE

City-State-Zip: SANTA ROSA BEACH FL 32459 City-State-Zip: SANTA ROSA BEACH FL 32459

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: JOEL R. HOOPER PRESIDENT