

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000127561

**Entity Name:** CREME DE LA CREME LA DIAMOND SHINE LLC

**Current Principal Place of Business:**

521 W BAY ST  
JACKSONVILLE, FL 32202

**Current Mailing Address:**

521 W BAY ST  
JACKSONVILLE, FL 32202 US

**FEI Number: 83-0678614**

**Certificate of Status Desired:** No

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

BOOKKEEPING AND ACCOUNTING OF FL INC  
9905 OLD ST AUGUSTINE RD DR  
SUITE 501  
JACKSONVILLE, FL 32257 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  
Name ROBINSON, DERICK  
Address 521 W BAY ST  
City-State-Zip: JACKSONVILLE FL 32202

*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: DERICK ROBINSON**

**MGR**

**04/30/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date