

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000186523

**Entity Name:** OOLONG LLC

**Current Principal Place of Business:**

2457 WHISPERING PINE BLVD.  
NAVARRE, FL 32566

**Current Mailing Address:**

2457 WHISPERING PINE BLVD.  
NAVARRE, FL 32566

**FEI Number:** 83-1460553

**Certificate of Status Desired:** No

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

HO, HUNG  
2457 WHISPERING PINE BLVD.  
NAVARRE, FL 32566 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 HO, HUNG  
Address 2457 WHISPERING PINE BLVD.  
City-State-Zip: NAVARRE FL 32566

*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:** HUNG HO

MANAGER

04/20/2019

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

\_\_\_\_\_ Date