

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000217456

**Entity Name:** ORANGE LIGHT, LLC

**Current Principal Place of Business:**

10315 WELLEBY ISLES LANE  
SUNRISE, FL 33351

**Current Mailing Address:**

10315 WELLEBY ISLES LANE  
SUNRISE, FL 33351 US

**FEI Number:** 83-2139656

**Certificate of Status Desired:** No

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

OLSEN, LELAND A  
10315 WELLEBY ISLES LANE  
SUNRISE, FL 33351 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:** LELAND A. OLSEN

01/14/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                          |                 |                          |
|-----------------|--------------------------|-----------------|--------------------------|
| Title           | MANAGER                  | Title           | MANAGER                  |
| Name            | OLSEN, LELAND A          | Name            | SPEAKE, JOANNE           |
| Address         | 10315 WELLEBY ISLES LANE | Address         | 10315 WELLEBY ISLES LANE |
| City-State-Zip: | SUNRISE FL 33351         | City-State-Zip: | SUNRISE FL 33351         |

*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:** LELAND OLSEN

MANAGER

01/14/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date