

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000253601

Entity Name: ALIMENTS DE LEARNEL LLC

Current Principal Place of Business:

3317 CAMELOT DR.
HAINES CITY, FL 33844

Current Mailing Address:

PO BOX 1542
DAVENPORT, FL 33836 US

FEI Number: 83-2317575

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, LEARNEL A
3317 CAMELOT DR.
HAINES CITY, FL 33844 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 OWNER
Name WILLIAMS, LEARNEL
Address 3317 CAMELOT DR.
City-State-Zip: HAINES CITY FL 33844

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: LEARNEL A. WILLIAMS

OWNER

04/01/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date