

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000174349

**Entity Name:** SHAENICOLE STUDIOS LLC

**Current Principal Place of Business:**

222 SW 1ST STREET  
APT 7  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

222 SW 1ST STREET  
APT 7  
POMPANO BEACH, FL 33060

**FEI Number:** 84-2627537

**Certificate of Status Desired:** No

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

STANLEY, SHARON N MRS.  
222 SW 1ST STREET  
7  
POMPANO BEACH, FL 33060 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 MR.  
Name STANLEY, MICHAEL D  
Address 222 SW 1ST STREET APT.7  
City-State-Zip: POMPANO BEACH FL 33060

Title CEO  
Name STANLEY, SHARON N  
Address 222 SW 1ST STREET  
APT 7  
City-State-Zip: POMPANO BEACH FL 33060

*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:** SHARON N STANLEY

**CEO**

**01/14/2020**

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

\_\_\_\_\_  
Date