

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000199635

**Entity Name:** ASPECTS LIMITED LLC

**Current Principal Place of Business:**

1436 PEACHFIELD DR  
VALRICO, FL 33596

**Current Mailing Address:**

1436 PEACHFIELD DR  
VALRICO, FL 33596

**FEI Number:** 84-2714120

**Certificate of Status Desired:** No

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

JOHNSON, LAUREN  
1436 PEACHFIELD DR  
VALRICO, FL 33596 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            PRES  
Name            JOHNSON, LAUREN  
Address        1436 PEACHFIELD DR  
City-State-Zip: VALRICO FL 33596

*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:** LAUREN JOHNSON

**PRESIDENT**

**01/17/2020**

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

\_\_\_\_\_ Date