## 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: DANIELLE BARNETT

Electronic Signature of Signing Authorized Person(s) Detail

**REGISTERED AGENT** 

Date

Certificate of Status Desired: Yes

# 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.

Authorized Person(s) Detail :					
Title	MGR	Title	AP		
Name	FORTE, MICHAEL T	Name	BARNETT, DANIELLE M		
Address	7659 ISABELLA DRIVE APT K	Address	7659 ISABELLA DRIVE APT K		
City-State-Zip:	PORT RICHEY FL 34668	City-State-Zip:	PORT RICHEY FL 34668		

SIGNATU	RE:					
	Electronic Signature of Registered Agent	Electronic Signature of Registered Agent				
Authorized Person(s) Detail :						
Title	MGR	Title	AP			
Name	FORTE, MICHAEL T	Name	BARNETT, DANIELLE M			
Address	7659 ISABELLA DRIVE APT K	Address	7659 ISABELLA DRIVE APT K			

7659 ISABELLA DRIVE

Κ PORT RICHEY, FL 34668

## FEI Number: 84-4651823

PORT RICHEY, FL 34668 US

BARNETT, DANIELLE M 7659 ISABELLA DRIVE

Κ

## Name and Address of Current Registered Agent:

## **Current Mailing Address:**

5413 MAIN STREET 5413 NEW PORT RICHEY, FL 34652

DOCUMENT# L19000259929

Entity Name: ADAPT FRESHNESS L.L.C.

**Current Principal Place of Business:** 

## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Jun 20, 2020 Secretary of State 9772417305CC

Date

06/20/2020