

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000288870

**Entity Name:** COVERED LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

3956 W TOWN CENTER BLVD  
PMB 121  
ORLANDO, FL 32837

**Current Mailing Address:**

3956 W TOWN CENTER BLVD  
PMB 121  
ORLANDO, FL 32837 US

**FEI Number:** 85-1470591

**Certificate of Status Desired:** Yes

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

COICOU, JASMINE D  
3956 W TOWN CENTER BLVD  
PMB 121  
ORLANDO, FL 32837 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            CEO  
Name            COICOU, JASMINE  
Address        3956 W TOWN CENTER BLVD  
                  PMB 121  
City-State-Zip: ORLANDO FL 32837

Title            COO  
Name            COICOU, DAVID  
Address        3956 W TOWN CENTER BLVD  
                  PMB 121  
City-State-Zip: ORLANDO FL 32837

*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:** JASMINE COICOU

CEO

06/06/2021

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

\_\_\_\_\_  
Date