JONES, SHELIA E 7461 CROOKED LAKE CIR ORLANDO, FL 32818 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	: SHELIA E JONES			03/04/2022
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AMBR	Title	MANAGER	
Name	JONES, SHELIA E	Name	SMITH, CALVIN B JR.	
Address	7461 CROOKED LAKE CIR	Address	9549 CAPITOLA RD	
City-State-Zip:	ORLANDO FL 32818	City-State-Zip:	TALLAHASSEE FL 32317	

ORLANDO, FL 32818

Current Mailing Address:

7461 CROOKED LAKE CIR

2394 NORTH POWERS DRIVE ORLANDO, FL 32818 US

MANGER

City-State-Zip: TALLAHASSEE FL 32317

SMITH, CA'SHAYLA 9549 CAPITOLA RD

FEI Number: 85-1142306

Name and Address of Current Registered Agent:

Title

Name

Address

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

SIGNATURE: SHELIA E. JONES

that my name appears above, or on an attachment with all other like empowered.

OWNER

03/04/2022

Electronic Signature of Signing Authorized Person(s) Detail

2022 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L20000075759

Entity Name: "ZSAZSA" SWEET LILY TREATS LLC.

Current Principal Place of Business:

Certificate of Status Desired: Yes

Date

FILED Mar 04, 2022 Secretary of State 9008899681CR