

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000357557

Entity Name: AMANDA SHARON LLC

Current Principal Place of Business:

4032 BOYD RD
DOUGLASVILLE, GA 30134

Current Mailing Address:

4032 BOYD RD
DOUGLASVILLE, GA 30134 US

FEI Number: 85-4073596

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHARON, CHRIS C
4032 BOYD RD
DOUGLASVILLE, FL 30134 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 MGR
Name SHARON, AMANDA
Address 4032 BOYD RD
City-State-Zip: DOUGLASVILLE GA 30134

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, AMANDA

MANAGER

04/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date