

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000002357

Entity Name: ROBERT FOLEY, LLC**Current Principal Place of Business:**1300 SUMMIT LAKE DR.
ANGWIN, CA 94508**Current Mailing Address:**PO BOX 847
ANGWIN, CA 94508 US**FEI Number:** 68-0469848**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ANGELS SHARE SOUTH, LLC
1600 33RD STREET
UNIT #104
ORLANDO, FL 32839 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	MANAGING MEMBER
Name	FOLEY, ROBERT D JR.
Address	PO BOX 847
City-State-Zip:	ANGWIN CA 94508

Title	BUSINESS MANAGER
Name	KEHOE, KELLI L
Address	PO BOX 847
City-State-Zip:	ANGWIN CA 94508

Title	MGRM
Name	KEHOE, KELLI L
Address	PO BOX 847
City-State-Zip:	ANGWIN CA 94508

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: KELLI L KEHOE

BUSINESS MANAGER

01/12/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date