

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000000287

**Entity Name:** MIRACLE MULTIPLICATION, LLC

**Current Principal Place of Business:**

10235 W. SAMPLE ROAD, UNIT #205  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

10235 W. SAMPLE ROAD, UNIT #205  
CORAL SPRINGS, FL 33065

**FEI Number:** 30-0017173

**Certificate of Status Desired:** No

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

BACHELOR, BYRON  
10235 W. SAMPLE ROAD, UNIT #205  
CORAL SPRINGS, FL 33065 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 S  
Name DYER, GLORIA  
Address 10155 NW 31 CT  
City-State-Zip: SUNRISE FL 33351

Title D  
Name BACHELOR, BYRON  
Address 10235 W. SAMPLE RD #205  
City-State-Zip: CORAL SPRINGS FL 33065

*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:** GLORIA A DYER

04/10/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date