

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000046135

Entity Name: LEAVITT'S BUGGY BATH, L.L.C.

Current Principal Place of Business:

1127 NO. YOUNG BLVD
CHIEFLAND, FL 32626

Current Mailing Address:

P.O. BOX 41
KAMAS, UT 84036

FEI Number: 33-1077279

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEAVITT, STANLEY D
572 NE 339 AVE
OLD TOWN, FL 32680 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 OWNER
Name LEAVITT, STANLEY D
Address 527NE 339 AVE
City-State-Zip: OLD TOWN FL 32680

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: STANLEY LEAVITT

OWNER

01/11/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date