

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000092200

Entity Name: C-LEVEL PARTNERS, LLC

Current Principal Place of Business:

3303 S. OMAR AVE.
TAMPA, FL 33629

Current Mailing Address:

3303 S. OMAR AVE.
TAMPA, FL 33629

FEI Number: 51-0610271

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHEPPARD, JOHN K
3303 S. OMAR AVE.
TAMPA, FL 33629 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 MGRM
Name SHEPPARD, JOHN K
Address 3303 S. OMAR AVE.
City-State-Zip: TAMPA FL 33629

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: JOHN K. SHEPPARD

CEO

02/05/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date