## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000022784

Entity Name: OMEGA ESSENCE LLC

**Current Principal Place of Business:** 

10542 LEM TURNER RD JACKSONVILLE, FL 32218

**Current Mailing Address:** 

11984 CHERRY CREEK ROAD JACKSONVILLE, FL 32218

FEI Number: 46-1644069 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NELSON, TAQUILA S 11984 CHERRY CREEK RD JACKSONVILLE, FL 32218 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.

Title

**MGRM** 

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Apr 29, 2017

**Secretary of State** 

CC7047697457

Authorized Person(s) Detail:

Title MGRM

Name NELSON, TAQUILA S Name NELSON, LEROY

Address 11984 CHERRY CREEK RD Address 11984 CHERRY CREEK RD

City-State-Zip: JACKSONVILLE FL 32218 City-State-Zip: JACKSONVILLE FL 32218

Title MGRM Title MGRM

Name OSUNKOYA, ABIODUN O Name NELSON, SANDRA

Address 9256 7TH AVE Address 11984 CHERRY CREEK RD City-State-Zip: JACKSONVILLE FL 32208 City-State-Zip: JACKSONVILLE FL 32218

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: TAQUILA S NELSON

**OWNER** 

04/29/2017