## 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: PAMELA F LEONARD

Electronic Signature of Signing Authorized Person(s) Detail

PRESIDENT

04/20/2020

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: DAVID W. ADAMS 04/20/2020 Date Electronic Signature of Registered Agent

Authorized Pe	erson(s)	Detail :
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Title	MGRM	Title	MGRM
Name	LEONARD, PAMELA F	Name	LEONARD, JAMES J
Address	3559 BLUEBERRY DRIVE	Address	3559 BLUEBERRY DRIVE
City-State-Zip:	LAKELAND FL 33811	City-State-Zip:	LAKELAND FL 33811

# 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000023196

Entity Name: SILVER LEAF KITCHEN AND BATH, LLC

### **Current Principal Place of Business:**

3559 BLUEBERRY DR LAKELAND. FL 33811

#### **Current Mailing Address:**

3559 BLUEBERRY DRIVE LAKELAND, FL 33811

#### FEI Number: 27-5122949

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

ADAMS, DAVID W 1925 E. SECOND AVE. TAMPA, FL 33605 US

Certificate of Status Desired: No

Apr 20, 2020 Secretary of State 0994025870CC

FILED

Date