

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000111563

**Entity Name:** SLICES CONCESSION WEST LLC

**Current Principal Place of Business:**

994 GLENDALE AVE UNIT 3  
GAINESVILLE, FL 32653

**Current Mailing Address:**

2300 NW 71ST PLACE  
GAINESVILLE, FL 32653 US

**FEI Number:** 46-3459978

**Certificate of Status Desired:** No

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

LEONG, HOE CHUEN  
2300 NW 71ST PLACE  
GAINESVILLE, FL 32653 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 LEONG, HOE CHUEN  
Address 2300 NW 71ST PLACE  
City-State-Zip: GAINESVILLE FL 32653

Title MGRM  
Name KEARNS, JOSEPH  
Address 2300 NW 71ST PLACE  
City-State-Zip: GAINESVILLE FL 32653

Title MGRM  
Name WALDT, EVAN  
Address 2300 NW 71ST PLACE  
City-State-Zip: GAINESVILLE FL 32653

*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:** HOE CHUEN LEONG

**MANAGING MEMBER**

**01/29/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date