

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000071335

**Entity Name:** SAACLY SERVICE CENTER, LLC

**Current Principal Place of Business:**

5387 L. B. MCLEOD ROAD  
ORLANDO, FL 32811

**Current Mailing Address:**

5387 L. B. MCLEOD RD  
ORLANDO, FL 32811 US

**FEI Number:** 46-5674728

**Certificate of Status Desired:** Yes

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

ALLEN, SEDRICK  
2460 LAUREL BLOSSOM CIRCLE  
OCCOEE, FL 34761 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:** SEDRICK ALLEN

03/17/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            ALLEN, SEDRICK  
Address        6541 CANTERLEA DR  
City-State-Zip: ORLANDO FL 32811

Title            MANAGER  
Name            ALLEN, SANDRAE  
Address        621 6TH WAY  
City-State-Zip: WEST PALM BEACH FL 33407

*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:** SEDRICK ALLEN

PRESIDENT

03/17/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date