## 2015 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: No

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:

Electronic Signature of Registered Agent

Date

Date

FILED Jan 13, 2015

**Secretary of State** 

CC7331093006

Authorized Person(s) Detail:

Title PRESIDENT Title MANAGER

Name ALLEN, SEDRICK Name ALLEN, SANDRAE

Address 2460 LAUREL BLOSSOM CIRCLE Address 621 6TH WAY

City-State-Zip: OCCOEE FL 34761 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 01/13/2015

Electronic Signature of Signing Authorized Person(s) Detail