

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000085672

**Entity Name:** CHEST OF GOODS, LLC

**Current Principal Place of Business:**

83 GENEVA DR SUITE 623486  
OVIDO, FL 32765

**Current Mailing Address:**

83 GENEVA DR SUITE 623486  
OVIDO, FL 32765

**FEI Number:** 47-4035303

**Certificate of Status Desired:** No

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

ELLIS, CLIFFORD  
83 GENEVA DR SUITE 623486  
OVIDO, FL 32765 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           | MGR                  | Title           | MGR                  |
| Name            | ELLIS, CLIFFORD      | Name            | ELLIS, PATRICIA      |
| Address         | 3092 JUNE BERRY TERR | Address         | 3092 JUNE BERRY TERR |
| City-State-Zip: | OVIDO FL 32766       | City-State-Zip: | OVIDO FL 32766       |

*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:** CLIFFORD ELLIS

**MANAGER**

**01/23/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date