

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000083912

**Entity Name:** SHARON LEE MIKOL LLC.

**Current Principal Place of Business:**

5965 RED BUG LAKE ROAD  
SUITE 101  
WINTER SPRINGS, FL 32708

**Current Mailing Address:**

3077 HEIRLOOM ROSE PLACE  
OVIEDO, FL 32766 US

**FEI Number:** 82-1091268

**Certificate of Status Desired:** No

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

SHARON LEE MIKOL  
3077 HEIRLOOM ROSE PLACE  
OVIEDO, FL 32766 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  
Name SHARON LEE MIKOL  
Address 3077 HEIRLOOM ROSE PLACE  
City-State-Zip: OVIEDO 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:** SHARON MIKOL

MGR

02/08/2018

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date