# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000097996

Entity Name: OPTIMAL LLC

## **Current Principal Place of Business:**

4181 NW 1ST AVE 6-2012 BOCA RATON, FL 33431

# **Current Mailing Address:**

4181 NW 1ST AVE 6-2012 BOCA RATON, FL 33431 US

## FEI Number: 81-2727832

# Name and Address of Current Registered Agent:

CELESTIN, ALBERTA LYDIA 9026 HICKORY CIR TAMPA, FL 33615 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: ALBERTA LYDIA CELESTIN

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

TitleMANAGERNameCELESTIN, ALBERTA LYDIAAddress4181 NW 1ST AVE<br/>6-2012

City-State-Zip: BOCA RATON FL 33431

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.

MANAGER

SIGNATURE: ALBERTA CELESTIN

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 01, 2018 Secretary of State CC7365479893

Certificate of Status Desired: Yes

03/01/2018

Date

03/01/2018 Date