

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000131988

**Entity Name:** SAMUEL LEON LLC

**Current Principal Place of Business:**

564 SE 35TH TERRACE  
HOMESTEAD, FL 33033

**Current Mailing Address:**

114 COOPER ST. APT 3  
BROOKLYN, NY 11207 UN

**FEI Number:** 82-1346883

**Certificate of Status Desired:** No

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

SMITH, SAMUEL  
564 SE 35TH TERRACE  
HOMESTEAD, FL 33033 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            CEO  
Name            SMITH, SAMUEL  
Address        114 COOPER ST. APT 3  
City-State-Zip: BROOKLYN NY 11207

*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:** SAMUEL SMITH

**PRES**

**04/16/2018**

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

\_\_\_\_\_  
Date