

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000214631

**Entity Name:** THE KLEPZIG COMPANY LLC

**Current Principal Place of Business:**

3544 ST JOHNS BLUFF ROAD S  
APT. 318  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

46510 SAULS RD  
CALLAHAN, FL 32011

**FEI Number:** 81-4499565

**Certificate of Status Desired:** No

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

KLEPZIG, CALEB A  
3544 ST JOHNS BLUFF ROAD S  
APT. 318  
JACKSONVILLE, FL 32224 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            PRES  
Name            CALEB, KLEPZIG A  
Address        3544 ST JOHNS BLUFF ROAD S  
                  APT. 318  
City-State-Zip: JACKSONVILLE FL 32224

*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:** CALEB KLEPZIG

PRES

05/13/2019

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

\_\_\_\_\_ Date