

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000216607

**Entity Name:** LD1-HOLHAB, LLC

**Current Principal Place of Business:**

1286 B WASHINGTON STREET  
CLARKESVILLE, GA 30523

**Current Mailing Address:**

1286 B WASHINGTON STREET  
CLARKESVILLE, GA 30523 US

**FEI Number:** 81-5402938

**Certificate of Status Desired:** Yes

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

COTTON, RYAN  
4 KELLY BEA CT  
PONCE INLET, FL 32127 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           MANAGER  
Name           SKALSKI, JOSEPH C  
Address        PO BOX 1270  
City-State-Zip: CLARKESVILLE GA 30523

*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:** JOSEPH SKALSKI

**MANAGER**

**01/15/2018**

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

\_\_\_\_\_ Date