

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000100478

Entity Name: BAD MOMMA, LLC

Current Principal Place of Business:

1905 HOLLY OAK DRIVE
ORANGE PARK, FL 32065

Current Mailing Address:

PO BOX 284
HILLIARD, FL 32046

FEI Number: 82-1463146

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRAHAM, BRIAN K
1905 HOLLY OAK DRIVE
ORANGE PARK, FL 32065 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 AMBR
Name GRAHAM, BRIAN K
Address 1905 HOLLY OAK DRIVE
City-State-Zip: ORANGE PARK FL 32065

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: BRIAN GRAHAM

01/15/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date