

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000113743

**Entity Name:** HAZEL SWIMWEAR, LLC

**Current Principal Place of Business:**

387 CEDARSTONE WAY  
ST AUGUSTINE, FL 32092

**Current Mailing Address:**

387 CEDARSTONE WAY  
ST AUGUSTINE, FL 32092 US

**FEI Number: 82-1672057**

**Certificate of Status Desired: No**

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

CHRISTENSEN, REID M  
387 CEDARSTONE WAY  
ST AUGUSTINE, FL 32092 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	Title	AMBR
Name	CHRISTENSEN, KARIN	Name	CHRISTENSEN, REID
Address	387 CEDARSTONE WAY	Address	387 CEDARSTONE WAY
City-State-Zip:	ST AUGUSTINE FL 32092	City-State-Zip:	ST AUGUSTINE FL 32092

*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: REID CHRISTENSEN**

**AMBR**

**04/28/2018**

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

\_\_\_\_\_  
Date