

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000115912

Entity Name: UNLIMITED HEALTHY WATER LLC

Current Principal Place of Business:

1545 LAKESHORE DR.
MOUNT DORA, FL 32757

Current Mailing Address:

1545 LAKESHORE DR.
MOUNT DORA, FL 32757 US

FEI Number: 82-1698765

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REND, PHILLIP
1545 LAKESHORE DR
MOUNT DORA, FL 32757 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 RENO, PHILLIP
Address 1545 LAKESHORE DR.
City-State-Zip: MOUNT DORA FL 32757

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: PHILLIP RENO

OWNER

04/26/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date