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. 02/12/2019

SIGNATURE: COZETTE LON LILLARD

Electronic Signature of Signing Authorized Person(s) Detail

FEI Number: 82-2080285

Name and Address of Current Registered Agent:

LILLARD, COZETTE L 4152 LAKEWOOD RANCH BLVD LAKEWOOD RANCH, FL 34211 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

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	LILLARD, COZETTE L	Name	LILLARD, PATRICK A
Address	4152 LAKEWOOD RANCH BLVD	Address	4152 LAKEWOOD RANCH BLVD
City-State-Zip:	LAKEWOOD RANCH FL 34211	City-State-Zip:	LAKEWOOD RANCH FL 34211

MANAGER

Current Mailing Address: 4152 LAKEWOOD RANCH BLVD LAKEWOOD RANCH. FL 34211 US

DOCUMENT# L17000142745

Entity Name: COZETTE LON LILLARD, LLC

Current Principal Place of Business:

4152 LAKEWOOD RANCH BLVD LAKEWOOD RANCH. FL 34211

Feb 12, 2019 Secretary of State 7830495809CC

FILED

Certificate of Status Desired: No

Date

Date