

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000152292

Entity Name: RIVER LEAVES, LLC

Current Principal Place of Business:

16407 AVILA BLVD.
TAMPA, FL 33613

Current Mailing Address:

16407 AVILA BLVD.
TAMPA, FL 33613

FEI Number: 82-2336601

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SCHOELLHORN, STEVEN R
16407 AVILA BLVD.
TAMPA, FL 33613 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 THE SRS DISC TR UNDER THE RAS
TR
Address 16407 AVILA BLVD.
City-State-Zip: TAMPA FL 33613

Title AP
Name SCHOELLHORN, STEVEN R
Address 16407 AVILA BLVD.
City-State-Zip: TAMPA FL 33613

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: STEVEN R SCHOELLHORN

MANAGER

03/25/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date