## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000158993

Entity Name: NP SHIFT, LLC

**Current Principal Place of Business:** 

**7810 SW 32 TERRACE** MIAMI, FL 33155

**Current Mailing Address:** 

**7810 SW 32 TERRACE** MIAMI. FL 33155

**FEI Number: APPLIED FOR** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HERRERA, ANA L 13301 SW 204 STREET MIAMI, FL 33177 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

**FILED** Apr 12, 2019

**Secretary of State** 

1820101089CC

## Authorized Person(s) Detail:

Title MGR

Name LEAL, DELIA

Address **7810 SW 32 TERRACE** 

City-State-Zip: MIAMI FL 33155

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.

04/12/2019 SIGNATURE: DELIA LEAL **MANAGER**