

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000228816

Entity Name: EDMORE INVESTMENTS LLC**Current Principal Place of Business:**1750 N. UNIVERSITY DR.
215
CORAL SPRINGS, FL 33071**Current Mailing Address:**1750 N. UNIVERSITY DR.
215
CORAL SPRINGS, FL 33071 US**FEI Number:** 82-3340751**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PAWLAK, EDWARD
6120 NW 122ND TERRACE
CORAL SPRINGS, FL 33076 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	PAWLAK, EDWARD
Address	1750 N. UNIVERSITY DR., SUITE 215
City-State-Zip:	CORAL SPRINGS FL 33071

Title	AMBR
Name	PAWLAK, HENRIET
Address	1750 N. UNIVERSITY DR., SUITE 215
City-State-Zip:	CORAL SPRINGS FL 33071

Title	AMBR
Name	PAWLAK, CAROLINE
Address	1750 N. UNIVERSITY DR., SUITE 215
City-State-Zip:	CORAL SPRINGS FL 33071

Title	AMBR
Name	PAWLAK, STEPHANIE
Address	1750 N. UNIVERSITY DR., SUITE 215
City-State-Zip:	CORAL SPRINGS FL 33071

Title	MGR
Name	PAWLAK, EDWARD
Address	1750 N. UNIVERSITY DR., SUITE 215
City-State-Zip:	CORAL SPRINGS FL 33071

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: EDWARD PAWLAK**PRESIDENT****01/02/2018**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date