2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2019
Secretary of State
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Entity Name: VILLA SONRISA, L.L.C.

Current Principal Place of Business:

909 SE 43RD TERRACE
CAPE CORAL, FL 33904

Current Mailing Address:

P.O. BOX 101740
CAPE CORAL, FL 33910 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WRIGHT, CHRISTINE F ESQ.
923 DEL PRADO BLVD., SUITE 106
CAPE CORAL, FL 33990 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	MGR
Name	MAHLAN, CHARLES
Address	P.O. BOX 101740
City-State-Zip:	CAPE CORAL FL 33910

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: CHARLES MAHLAN MEMBER 01/08/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date