

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000243967

**Entity Name:** THE CUDDLE PROS, LLC

**Current Principal Place of Business:**

1400 COLONIAL BLVD  
SUITE 260  
FORT MYERS, FL 33907

**Current Mailing Address:**

1400 COLONIAL BLVD  
SUITE 260  
FORT MYERS, FL 33907 US

**FEI Number:** 47-3802892

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BURROUGHS, GENESIS  
3118 CHIQUITA BLVD S  
CAPE CORAL, FL 33914 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 BURROUGHS, GENESIS  
Address 3118 CHIQUITA BLVD S  
City-State-Zip: CAPE CORAL FL 33914

Title AMBR  
Name BURROUGHS, CRAIG  
Address 3118 CHIQUITA BLVD S  
City-State-Zip: CAPE CORAL FL 33914

*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:** CRAIG BURROUGHS

**AUTHORIZED  
REPRESENTATIVE**

**04/12/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date