

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000251757

**Entity Name:** CAPITAL CITY LEASING LLC

**Current Principal Place of Business:**

4043 CAMELOT WAY  
TALLAHASSEE, FL 32309

**Current Mailing Address:**

4043 CAMELOT WAY  
TALLAHASSEE, FL 32309 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SALEM, AHMED  
4043 CAMELOT WAY  
TALLAHASSEE, FL 32309 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 SALEM, AHMED  
Address 4043 CAMELOT WAY  
City-State-Zip: TALLAHASSEE FL 32309

Title MGR  
Name CAPITAL CITY IMPORTS LLC  
Address 4043 CAMELOT WAY  
City-State-Zip: TALLAHASSEE FL 32309

*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:** AHMED SALEM

**MANAGER**

**02/11/2019**

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

\_\_\_\_\_  
Date