

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000004759

**Entity Name:** TRACYLYNN COMPANY LLC

**Current Principal Place of Business:**

2703 MANNING DR  
TRINITY, FL 34655

**Current Mailing Address:**

2703 MANNING DR  
TRINITY, FL 34655 US

**FEI Number: 82-3928600**

**Certificate of Status Desired: No**

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

CROUSHORN, TRACY  
2703 MANNING DR  
TRINITY, FL 34655 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            CROUSHORN, TRACY  
Address        2703 MANNING DR  
City-State-Zip: TRINITY FL 34655

*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: TRACY CROUSHORN**

**OWNER**

**04/16/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date