## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000027336

Entity Name: LENIGUI, LLC

**Current Principal Place of Business:** 

7817 SUMMERLAKE GROVES STREET WINTER GARDEN. FL 34787

**Current Mailing Address:** 

7817 SUMMERLAKE GROVES STREET WINTER GARDEN. FL 34787 US

**FEI Number: APPLIED FOR** Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SALES, GABIA GUIMARAES 7817 SUMMERLAKE GROVES STREET WINTER GARDEN, FL 34787 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: GABIA GUIMARAES SALES 06/30/2020

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title **MGRM** 

Name GUIMARAES, LENI Name GUIMARAES SALES, GABIA

7817 SUMMERLAKE GROVES ST Address Address 7817 SUMMERLAKE GROVES STREET

WINTER GARDE FL 34787 City-State-Zip: City-State-Zip: WINTER GARDEN FL 34787

Title MRGM

Title **MGRM** DASILVA, KELY Name

Address 7817 SUMMERLAKE GROVES STREET 7817 SUMMERLAKE GROVES STREET Address

Name

MAZZOTTA, ANA L

City-State-Zip: WINTER GARDEN FL 34787

City-State-Zip: WINTER GARDEN FL 34787

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: GABIA GUIMARAES SALES

06/30/2020

**FILED** Jun 30, 2020

**Secretary of State** 

4790813270CC

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date