

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000125246

Entity Name: KALLIE PARDEN RAWLES LLC

Current Principal Place of Business:

41 LIVE OAK LN
DEFUNIAK SPRINGS, FL 32433

Current Mailing Address:

41 LIVE OAK LN
DEFUNIAK SPRINGS, FL 32433 US

FEI Number: 83-0618373

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAWLES, KALLIE P
41 LIVE OAK LN
DEFUNIAK SPRINGS, FL 32433 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 RAWLES, KALLIE P
Address 41 LIVE OAK LN
City-State-Zip: DEFUNIAK SPRINGS FL 32433

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: KALLIE P RAWLES

OWNER

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date