

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000160565

Entity Name: AMAZING HANDS BY APRIL IVORY, LLC

Current Principal Place of Business:

1430 ELLIS TRACE DR W
JACKSONVILLE, FL 32205

Current Mailing Address:

1430 ELLIS TRACE DR W
JACKSONVILLE, FL 32205 UN

FEI Number: 83-1098611

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

IVORY, APRIL
1430 ELLIS TRACE DR W
JACKSONVILLE, FL 32205 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, R/A
Name IVORY, APRIL
Address 1430 ELLIS TRACE DR W
City-State-Zip: JACKSONVILLE FL 32205

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: APRIL IVORY

MGR

04/27/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date