

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000197574

Entity Name: LLB ISLAMORADA, LLC

Current Principal Place of Business:

FIRST KENTUCKY TRUST, 297 N. HUBBARDS LANE
SUITE 202
LOUISVILLE, KY 40207

Current Mailing Address:

FIRST KENTUCKY TRUST, 297 N. HUBBARDS LANE
SUITE 202
LOUISVILLE, KY 40207 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOONE, LAURA L
1171 NORTH OCEAN BLVD
4A SOUTH
GULFSTREAM, FL 33483 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 BOONE, LAURA L
Address 1171 NORTH OCEAN BLVD, 4A SOUTH
City-State-Zip: OCEANSTREAM FL 33483

Title AR
Name GERCH, JEREMY P
Address 101 SOUTH FIFTH STREET
City-State-Zip: LOUISVILLE KY 40202

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: LAURA LEE BOONE

04/09/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date