

2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L18000207174

Entity Name: ALICIA'S LLC

Current Principal Place of Business:

255 CAPRI CIRCLE N
SUITE 35
TREASURE ISLAND, FL 33706

Current Mailing Address:

255 CAPRI CIRCLE N
SUITE 35
TREASURE ISLAND, FL 33706 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDERSON, ALICIA
255 CAPRI CIRCLE N
SUITE 35
TREASURE ISLAND, FL 33706 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: ALICIA H ANDERSON

10/29/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PTS
Name ANDERSON, ALICIA H
Address 255 CAPRI CIRCLE N
 SUITE 35
City-State-Zip: TREASURE ISLAND FL 33706

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: ALICIA H ANDERSON

MANAGING MEMBER

10/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date