

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000066282

Entity Name: SLEEP EXPRESSIONS LLC

Current Principal Place of Business:

3701 SHORE BLVD
OLDSMAR, FL 34677

Current Mailing Address:

3701 SHORE BLVD
OLDSMAR, FL 34677 US

FEI Number: 83-3867699

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GARRITY, MICHELLE
3701 SHORE BLVD
OLDSMAR, FL 34677 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
Name GARRITY, MICHELLE
Address 3701 SHORE BLVD
City-State-Zip: OLDSMAR FL 34677

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: MICHELLE GARRITY

OWNER

01/31/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date