

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000098807

Entity Name: ASHLEADER LLC

Current Principal Place of Business:

9550 NW 24TH STREET
SUNRISE, FL 33322

Current Mailing Address:

PO BOX 297527
PEMBROKE PINES, FL 33029

FEI Number: 46-4902815

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEADER, ASHLEY
9550 NW 24TH STREET
SUNRISE, FL 33322 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 ASHLEY, LEADER
Address 9550 NW 24TH STREET
City-State-Zip: SUNRISE FL 33322

Title MGR
Name LEADER, ASHLEY
Address 9550 NW 24TH STREET
City-State-Zip: SUNRISE FL 33322

Title MGR
Name LEADER, ASHLEY
Address 9550 NW 24TH STREET
City-State-Zip: SUNRISE FL 33322

Title MGR
Name LEADER, ASHLEY
Address 9550 NW 24TH STREET
City-State-Zip: SUNRISE FL 33322

Title MGR
Name LEADER, ASHLEY
Address 9550 NW 24TH STREET
City-State-Zip: SUNRISE FL 33322

Title MGR
Name LEADER, ASHLEY
Address 9550 NW 24TH STREET
City-State-Zip: SUNRISE FL 33322

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: ASHLEY LEADER

MGR

03/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date