

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000437868

**Entity Name:** CLEOPATRA KENNELS LLC

**Current Principal Place of Business:**

11278 SW CRENSHAW AVE  
LOT 4  
LAKE SUZY, FL 34269

**Current Mailing Address:**

11278 SW CRENSHAW AVE LOT 4  
4  
LAKE SUZY, FL 34269 UN

**FEI Number:** 92-0609244

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CASON, CLIFTON A SR  
11278 SW CRENSHAW AVE  
LOT 4  
LAKE SUZY, FL 34269 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 CASON, CLIFTON A  
Address 11278 SW CRENSHAW AVE LOT 4, 4  
City-State-Zip: LAKE SUZY FL 34269

*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:** CASON, CLIFTON A

**MANAGER**

**05/01/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date