

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000049931

FILED  
Apr 27, 2012  
Secretary of State

Entity Name: ARTLETICS, L.L.C.

**Current Principal Place of Business:**

1019 COASTAL CIRCLE  
OCOEE, FL 34761

**New Principal Place of Business:**

**Current Mailing Address:**

1019 COASTAL CIRCLE  
OCOEE, FL 34761

**New Mailing Address:**

FEI Number: 20-0342068

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CIOFFI, SHERRY L  
1019 COASTAL CIRCLE  
OCOEE, FL 34761 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CIOFFI, JOSEPH V  
Address: 1019 COASTAL CIRCLE  
City-St-Zip: OCOEE, FL 34761

Title: MGR  
Name: CROPP, ISAAC V III  
Address: 2823 SANTANA AVENUE  
City-St-Zip: ORLANDO, FL 32835

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JOSEPH V. CIOFFI

MGRM

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date