

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000080358

FILED
Apr 10, 2012
Secretary of State

Entity Name: CUFFLINX, LLC

Current Principal Place of Business:

4532 W KENNEDY BLVD STE 523
TAMPA, FL 336092042 US

New Principal Place of Business:

Current Mailing Address:

4532 W KENNEDY BLVD STE 523
TAMPA, FL 336092042 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PASCUCCI, CHRIS
4532 W KENNEDY BLVD STE 523
TAMPA, FL 336092042 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: FELDMAN, ADAM M
Address: 1773 W FLETCHER AVE
City-St-Zip: TAMPA, FL 33612 US

Title: MGRM
Name: FELDMAN, RANDY M DDS MS
Address: 1773 W FLETCHER AVE
City-St-Zip: TAMPA, FL 33612 US

Title: MGRM
Name: ORSINO, JOSEPH
Address: 1502 S HOWARD AVE
City-St-Zip: TAMPA, FL 33606

Title: MGRM
Name: PASCUCCI, CHRIS
Address: 4532 W KENNEDY BLVD STE 523
City-St-Zip: TAMPA, FL 336092042 US

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: CHRIS PASCUCCI

MGRM

04/10/2012

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