

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004239

Entity Name: MATTHEW PATRICK LC

Current Principal Place of Business:

C/O MATTHEW DEMIKE
5419 LAKE HOWELL RD
WINTER PARK, FL 32792

Current Mailing Address:

C/O MATTHEW DEMIKE
5419 LAKE HOWELL RD
WINTER PARK, FL 32792 US

FEI Number: 59-3702260

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEMIKE, MATTHEW
5419 LAKE HOWELL RD
WINTER PARK, FL 32792 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 MGRM
Name DEMIKE, MATTHEW
Address 5419 LAKE HOWELL ROAD
City-State-Zip: WINTER PARK FL 32792

Title MGR
Name MCCUNE, LEROY
Address 53 HILLSBORO DR
City-State-Zip: ORCHARD PARK NY 14127

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: MATTHEW DEMIKE

MGRM

04/28/2015

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date