С

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: JANE J. CARTER

Electronic Signature of Signing Authorized Person(s) Detail

Current Mailing Address:

Entity Name: 10612 SHELDON ROAD, LLC

Current Principal Place of Business:

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

4010 CEDAR CAY CIRCLE VALRICO, FL 33596

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DOCUMENT# L02000016122

FEI Number: 11-3658508

Name and Address of Current Registered Agent:

CARTER, JANE 4010 CEDAR CAY CIRCLE VALRICO, FL 33596 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

Authorized Person(s) Detail :

GR	Title	MGRM
ARTER, JANE	Name	CARTER, MICHAEL R
10 CEDAR CAY CIRCLE	Address	3614 CORDGRASS DRIVE
ALRICO FL 33596	City-State-Zip:	VALRICO FL 33596
۵ ()	RTER, JANE 10 CEDAR CAY CIRCLE	INTER, JANE Name 10 CEDAR CAY CIRCLE Address

FILED Mar 03, 2016 Secretary of State CC7742207503

Date

Certificate of Status Desired: No

MANAGER

03/03/2016

Date