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.

PRESIDENT

SIGNATURE: MARIA C. TOBIN

Electronic Signature of Signing Authorized Person(s) Detail

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## **Current Principal Place of Business:**

1819 SOUTH INLET DRIVE MARCO ISLAND, FL 34145

## **Current Mailing Address:**

1819 SOUTH INLET DRIVE MARCO ISLAND, FL 34145

DOCUMENT# L03000037114

## FEI Number: 55-0851224

## Name and Address of Current Registered Agent:

TOBIN, MARIA C 1819 SOUTH INLET DRIVE MARCO ISLAND, FL 34145 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	: MARIA C. TOBIN			04/08/2015	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MGRM	Title	MRS		
Name	TOBIN, MARIA C	Name	TRAINQUE, KRISTINA B		
Address	1819 S. INLET DR	Address	163 WHITE PINE DRIVE		
City-State-Zip:	MARCO ISLAND FL 34145	City-State-Zip:	ASHEVILLE NC 28805		

FILED Apr 08, 2015 Secretary of State CC0816919171

Certificate of Status Desired: No

Date

04/08/2015