### 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000007135

Entity Name: IF, L.L.C.

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

9229 EQUUS CIRCLE BOYNTON BEACH, FL 33472

### **Current Mailing Address:**

PO BOX 480365 DELRAY BEACH, FL 33448

### FEI Number: 58-2679207

# Name and Address of Current Registered Agent:

HABERMAN, NANCI 9229 EQUUS CIRCLE BOYNTON BEACH, FL 33472 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 :

Title	MGR	Title	MGR
Name	HABERMAN, DAVID	Name	HABERMAN, NANCI
Address	PO BOX 480365	Address	PO BOX 480365
City-State-Zip:	DELRAY BEACH FL 33448	City-State-Zip:	DELRAY BEACH FL 33448

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: NANCI HABERMAN

MGR

03/21/2016 Date

Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 21, 2016 Secretary of State CC6228980451

Certificate of Status Desired: No