

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038025

Entity Name: TBI L.L.C.

Current Principal Place of Business:

917 NW 31 AVE
POMPANO BEACH, FL 33069

Current Mailing Address:

PO BOX 667306
POMPANO BEACH, FL 33066

FEI Number: 20-1128964

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECRAFT, MARSHA L
2415 SW 35 AVE
DELRAY BCH, FL 33445 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	REVOCABLE TRUST OF THOMAS E. BECRAFT
Address	2415 SW 35 AVE
City-State-Zip:	DELRAY FL 33445

Title	MGRM
Name	REVOCABLE TRUST OF MARSHA L BECRAFT
Address	2415 SW 35 AVE
City-State-Zip:	DELRAY FL 33445

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: MARSHA BECRAFT

REG AGENT

01/12/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date