#### 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000049931

Entity Name: ARTLETICS, L.L.C.

Apr 28, 2014 Secretary of State CC3926931288

**FILED** 

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

1019 COASTAL CIRCLE OCOEE, FL 34761

## **Current Mailing Address:**

1019 COASTAL CIRCLE OCOEE, FL 34761

FEI Number: 20-0342068 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

CIOFFI, SHERRY L 1019 COASTAL CIRCLE OCOEE, FL 34761 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

Title

MGR

Name CIOFFI, JOSEPH V

Name

CROPP, ISAAC VIII 2823 SANTANA AVENUE

City-State-Zip: OCOEE FL 34761

Address

1019 COASTAL CIRCLE

City-State-Zip:

Address

ORLANDO FL 32835

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: JOSEPH V CIOFFI

04/28/2014