

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000008686

**Entity Name:** ORIGINS, LLC

**Current Principal Place of Business:**

1600 NW 163 STREET  
MIAMI, FL 33169

**Current Mailing Address:**

1600 NW 163 STREET  
ATTN: TAMMY LOVE  
MIAMI, FL 33169 US

**FEI Number:** 20-4191194

**Certificate of Status Desired:** No

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

HERMAN, ALISON PGC  
1600 NW 163 STREET  
MIAMI, FL 33169 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	MGR	Title	MGR
Name	CHAPLIN, WAYNE E	Name	KISER, EARL
Address	1600 NW 163 STREET	Address	19709 LITTLE LANE
City-State-Zip:	MIAMI FL 33169	City-State-Zip:	ALVA FL 33920

*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:** WAYNE E CHAPLIN

**MANAGER**

**03/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date