

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000046317

Entity Name: ROSE NC LLC

Current Principal Place of Business:

% BONNIE S. MILLER CPA
9050 PINES BLVD/SUITE 301
PEMBROKE PINES, FL 33024

Current Mailing Address:

% BONNIE S. MILLER CPA
9050 PINES BLVD/SUITE 301
PEMBROKE PINES, FL 33024

FEI Number: 20-4814331

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLER, BONNIE S
9050 PINES BLVD/SUITE 301
PEMBROKE PINES, FL 33024 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
Name MILLER, BONNIE S
Address 9050 PINES BLVD SUITE 301
City-State-Zip: PEMBROKE PINES FL 33024

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: BONNIE MILLER

MANAGER

04/25/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date