

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000046350

Entity Name: C.NAST, LLC

Current Principal Place of Business:

2814 S.W. 13TH STREET
GAINESVILLE, FL 32608

Current Mailing Address:

2814 S.W. 13TH STREET
GAINESVILLE, FL 32608 US

FEI Number: 20-4812089

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AVERA, MARK
2814 S.W. 13TH STREET
GAINESVILLE, FL 32608 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 AVERA, MARK
Address 209 N.W. 117TH WAY
City-State-Zip: GAINESVILLE FL 32607

Title MGRM
Name NEFF, JAMES A
Address 9809 N.W. 59TH TERRACE
City-State-Zip: GAINESVILLE FL 32653

Title MGRM
Name SHERMYEN, JOHN
Address 2814 S.W. 13TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title MGRM
Name TEEGEN, JOHN
Address 8440 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

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: MARK AVERA

MGRM

01/14/2015

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date