

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000064212

**Entity Name:** BONAMIE STUDIOS LLC

**Current Principal Place of Business:**

2010 SW WACAHOOA ROAD  
MICANOPY, FL 32667

**Current Mailing Address:**

2010 SW WACAHOOA ROAD  
MICANOPY, FL 32667 US

**FEI Number: 56-2641188**

**Certificate of Status Desired: No**

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

BONAMIE, CLIFFORD D  
2010 SW WACAHOOA ROAD  
MICANOPY, FL 32667 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	CLIFFORD, BONAMIE D	Name	JULIE, BONAMIE
Address	2010 SW WACAHOOA ROAD	Address	2010 SW WACAHOOA ROAD
City-State-Zip:	MICANOPY FL 32667	City-State-Zip:	MICANOPY FL 32667

*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: JULIE BONAMIE**

**MGR**

**04/09/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date