## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000116154

Entity Name: BRACE SHOP, LLC

**Current Principal Place of Business:** 

6560 W ROGERS CIRCLE SUITE 19

BOCA RATON, FL 33487

**Current Mailing Address:** 

6560 W ROGERS CIRCLE SUITE 19 BOCA RATON, FL 33487

FEI Number: 20-1216195 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MALCOM, WILLIAM 1280 SW 36TH AVE. SUITE 200

POMPANO BEACH, FL 33069 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: WILLIAM MALCOM 01/07/2015

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **MGRM** Title **MGRM** 

SHAPIRO, LYNNE R SHAPIRO, KENNETH D Name Name

Address 6560 WEST ROGERS CIRCLE Address 6560 WEST ROGERS CIRCLE

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

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: LYNNE SHAPIRO

MANAGING GENERAL **PARTNER** 

01/07/2015

**FILED** Jan 07, 2015

**Secretary of State** 

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