# that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: SUSAN L TAYLOR

Electronic Signature of Signing Authorized Person(s) Detail

## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L08000038703

#### Entity Name: SUSAN L TAYLOR, LLC

#### **Current Principal Place of Business:**

3150 N WICKHAM RD 3 MELBOURNE, FL 32935

#### **Current Mailing Address:**

3150 N. WICKHAM RD 3 MELBOURNE, FL 32935 US

#### FEI Number: 26-2425756

### Name and Address of Current Registered Agent:

TAYLOR, SUSAN 3150 N WICKHAM RD 3 MELBOURNE, FL 32935 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:

Authorized Person(s) Detail :
-------------------------------

MGRM	Title	MGR
TAYLOR, SUSAN L	Name	TAYLOR, RICHARD M
2420 MISTY WAY LANE	Address	414 EARL AVE
MELBOURNE FL 32935	City-State-Zip:	MELBOURNE FL 32901
	MGRM TAYLOR, SUSAN L 2420 MISTY WAY LANE	MGRMTitleTAYLOR, SUSAN LName2420 MISTY WAY LANEAddress

Electronic Signature of Registered Agent Date

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

MGRM

#### FILED Mar 03, 2016 Secretary of State CC6118804197

Certificate of Status Desired: No

03/03/2016 Date