

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000078333

Entity Name: THE SPICE & TEA EXCHANGE DISTRIBUTION, LLC

Current Principal Place of Business:

407 MARSHALL CIRCLE
ST. AUGUSTINE, FL 32086

Current Mailing Address:

407 MARSHALL CIRCLE
ST. AUGUSTINE, FL 32086 US

FEI Number: 26-3201978

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, JEFFREY D
2011 BAYVIEW PLACE
INDIAN ROCKS BEACH, FL 33785 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 MANAGING MEMBER
Name THE SPICE & TEA EXCHANGE
 HOLDINGS, LLC
Address 407 MARSHALL CIRCLE
City-State-Zip: ST. AUGUSTINE FL 32086

Title MANAGING MEMBER
Name DAVIS, JEFFREY D
Address 2011 BAYVIEW PLACE
City-State-Zip: INDIAN ROCKS BEACH FL 33785

Title MANAGING MEMBER
Name REHLING, STEVEN M
Address 3024B COASTAL HIGHWAY
City-State-Zip: ST. AUGUSTINE FL 32084

Title MANAGING MEMBER
Name REHLING, PENNY L
Address 3024B COASTAL HIGHWAY
City-State-Zip: ST. AUGUSTINE FL 32084

Title MANAGING MEMBER
Name FREEMAN, AMY P
Address 1624 SEABREEZE DRIVE
City-State-Zip: TARPON SPRINGS FL 34689

Title MANAGING MEMBER
Name FREEMAN, WILLIAM C
Address 1624 SEABREEZE DRIVE
City-State-Zip: TARPON SPRINGS FL 34689

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: JEFFREY D. DAVIS

MANAGING MEMBER

03/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date