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

SIGNATURE: ANN CARADONNA

Electronic Signature of Signing Authorized Person(s) Detail

FEI Number: 26-3263195 Name and Address of Current Registered Agent:

MORAN, BRIAN J. 111 NORTH ORANGE AVE STE 900 ORLANDO, FL 32801 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: BRIAN J. MORAN

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title MGR Name CARADONNA, ANN Address 3732 WATERCREST DRIVE City-State-Zip: LONGWOOD FL 32779

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

Certificate of Status Desired: No

03/09/2017 Date

FILED Mar 09, 2017 Secretary of State CC8471515341

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000080819

Entity Name: ANCAR ENTERPRISES OF CENTRAL FLORIDA, L.L.C.

Current Principal Place of Business:

3732 WATERCREST DRIVE LONGWOOD. FL 32779

Current Mailing Address:

3732 WATERCREST DRIVE LONGWOOD. FL 32779

MANAGER

03/09/2017

Date