

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000026240

Entity Name: FLORIDA FAMILY CONSIGNMENT, LLC

Current Principal Place of Business:

6006 SAWGRASS POINT DR
PORT ORANGE, FL 32128

Current Mailing Address:

6006 SAWGRASS POINT DR
PORT ORANGE, FL 32128 US

FEI Number: 26-4520368

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIVERA, BARBARA
6006 SAWGRASS POINT DR
PORT ORANGE, FL 32128 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 | MGRM | Title | MGRM |
| Name | RIVERA, BARBARA | Name | IGYARTO, SHERI |
| Address | 6006 SAWGRASS POINT DR | Address | 734 ROBERTS AVE |
| City-State-Zip: | PORT ORANGE FL 32128 | City-State-Zip: | DELAND FL 32724 |

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: BARBARA RIVERA

MANAGER OWNER

04/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date