

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000057988

**Entity Name:** ORVILLE TEX, LLC.

**Current Principal Place of Business:**

2042 HOLIDAY DRIVE  
HOLIDAY, FL 34691

**Current Mailing Address:**

2042 HOLIDAY DRIVE  
HOLIDAY, FL 34691 US

**FEI Number:** 27-0371529

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TEX, ORVILLE  
2042 HOLIDAY DRIVE  
HOLIDAY, FL 34691 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  
Name TEX, ORVILLE  
Address 2042 HOLIDAY DRIVE  
City-State-Zip: HOLIDAY FL 34691

*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:** ORVILLE TEX

MGRM

06/24/2015

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date