1062 NW 1ST 0	ncipal Place of Business: COURT BEACH, FL 33009		0001904	
Current Mai	ling Address:			
1062 NW 1S HALLANDAL	ST COURT LE BEACH,FL 33009 US			
FEI Number: 42-1770486			Certificate of Status Desired: No	
	Address of Current Registered Agent:			
Name and A	duress of ourrent registered Agent.			
FELDMAN , LO 2750 NE 185TH AVENTURA , F	RENA ESQ. HST L 33180 US			
FELDMAN , LO 2750 NE 185TH AVENTURA , F The above named	RENA ESQ. IST L 33180 US d entity submits this statement for the purpose of changing	its registered office or regis	0	
FELDMAN , LO 2750 NE 185TH AVENTURA , F The above named	RENA ESQ. HST L 33180 US	its registered office or regis	0	^{la.} 02/16/2015 Date
FELDMAN , LO 2750 NE 185TH AVENTURA , F The above named SIGNATURE	RENA ESQ. I ST L 33180 US d entity submits this statement for the purpose of changing E: LORENA FELDMAN	its registered office or regis	0	02/16/2015
FELDMAN , LO 2750 NE 185TH AVENTURA , F The above named SIGNATURE Authorized	RENA ESQ. I ST L 33180 US d entity submits this statement for the purpose of changing E: LORENA FELDMAN Electronic Signature of Registered Agent	its registered office or regis	0	02/16/2015
FELDMAN , LO 2750 NE 185TH AVENTURA , F The above named SIGNATURE Authorized Title	RENA ESQ. I ST L 33180 US d entity submits this statement for the purpose of changing E: LORENA FELDMAN Electronic Signature of Registered Agent Person(s) Detail :			02/16/2015 Date
FELDMAN , LO 2750 NE 185TH AVENTURA , F The above named SIGNATURE	RENA ESQ. I ST L 33180 US d entity submits this statement for the purpose of changing E: LORENA FELDMAN Electronic Signature of Registered Agent Person(s) Detail : MGRM	Title	MGRM	02/16/2015 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 that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SCHLEGEL, ERIC M

Electronic Signature of Signing Authorized Person(s) Detail

MGER

02/16/2015

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000099588

Entity Name: NETTE ECKE, LLC

FILED Feb 16, 2015 Secretary of State CC5190430670

Date