

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000121529

Entity Name: EAST EDGE, LLC

Current Principal Place of Business:

1419 MINK DR
APOPKA, FL 32703

Current Mailing Address:

1419 MINK DR
APOPKA, FL 32703 US

FEI Number: 30-0599454

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHNSON, KYLE
1419 MINK DR
APOPKA, FL 32703 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	JOHNSON, KYLE	Name	JOHNSON, ABBY
Address	1419 MINK DR	Address	1419 MINK DR
City-State-Zip:	APOPKA FL 32703	City-State-Zip:	APOPKA FL 32703

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: KYLE JOHNSON

MGRM

02/22/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date