

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000009227

Entity Name: ULTIMA ENTERPRISES OF FLORIDA, LLC.

Current Principal Place of Business:

6567 PATRICIA DR.
C/O UTE D. HARTMANN
WEST PALM BEACH, FL 33413

Current Mailing Address:

319 SARTO AVE
C/O MATTHEW HARTMANN
CORAL GABLES, FL 33134

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARTMANN, MATTHEW
319 SARTO AVE
CORAL GABLES, FL 33134 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 | MGR | Title | MGR |
| Name | HARTMANN, UTE | Name | HARTMANN, MATTHEW |
| Address | 6567 PARTICIA DR. | Address | 319 SARTO AVE |
| City-State-Zip: | WEST PALM BEACH FL 33413 | City-State-Zip: | CORAL GABLES FL 33134 |

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: MATTHEW HARTMANN

MANAGING MEMBER

04/22/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date