

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000019804

Entity Name: TNT OUTFITTERS LLC

Current Principal Place of Business:

3400 NW 43RD PLACE
BELL, FL 32619

Current Mailing Address:

PO BOX 236
BELL, FL 32619

FEI Number: 27-1956236

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMPSON, SHAWN
3400 NW 43RD PLACE
BELL, FL 32619 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	THOMPSON, SHAWN	Name	THOMAS, CHAD
Address	PO BOX 236	Address	PO BOX 236
City-State-Zip:	BELL FL 32619	City-State-Zip:	BELL FL 32619

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: CHAD THOMAS

MANAGER

02/18/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date