

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000071001

**Entity Name:** AGAPE TILE, LLC

**Current Principal Place of Business:**

8073 CYPRESS DRIVE SOUTH  
FORT MYERS, FL 33967

**Current Mailing Address:**

PO BOX 1180  
ROSE HILL, NC 28458

**FEI Number:** 35-2385058

**Certificate of Status Desired:** No

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

DITTRICK, STEPHANIE  
8073 CYPRESS DRIVE SOUTH  
FORT MYERS, FL 33967 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 DITTRICK, STEPHANIE  
Address 8073 CYPRESS DRIVE SOUTH  
City-State-Zip: FORT MYERS FL 33967

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STEPHANIE DITTRICK

**OWNER**

**01/04/2013**

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

\_\_\_\_\_  
Date