

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000087105

**Entity Name:** LUPE BOOKEEPING, LLC

**Current Principal Place of Business:**

5825 20TH AVE S  
GULFPORT, FL 33707

**Current Mailing Address:**

5825 20TH AVE S  
GULFPORT, FL 33707

**FEI Number:** 27-3274553

**Certificate of Status Desired:** No

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

HASTINGS, DAVID CCPA  
2207 54TH ST S  
GULFPORT, FL 33707 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 GAGNON, GUADALUPE  
Address 5825 20TH AVE S  
City-State-Zip: GULFPORT FL 33707

*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:** GUADALUPE GAGNON

MMBR

01/23/2017

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

\_\_\_\_\_ Date