

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000102078

**Entity Name:** FND PARTNERS LLC

**Current Principal Place of Business:**

17375 COLLINS AVE  
#2301  
SUNNY ISLES, FL 33160

**Current Mailing Address:**

17375 COLLINS AVE  
#2301  
SUNNY ISLES, FL 33160 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

JOHN C GOEDE P.A.  
8950 FONTANA DEL SOL WAY  
SUITE 100  
NAPLES, FL 34119 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 SHWEKY, FORTUNE  
Address 17375 COLLINS AVE, #2301  
City-State-Zip: SUNNY ISLES FL 33160

*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:** FORTUNE SHWEKY

MRG

03/22/2015

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

\_\_\_\_\_  
Date