#### 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000103659

Entity Name: TIGRAN LLC

Apr 24, 2017 Secretary of State CC0146689101

**FILED** 

# **Current Principal Place of Business:**

3263 LAKESHORE DRIVE FORT PIERCE, FL 34949

### **Current Mailing Address:**

3263 LAKESHORE DRIVE FORT PIERCE. FL 34949 US

FEI Number: 27-3608825 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

D:FI G, INC. 304 INDIAN TRACE 279 WESETON, FL 33326 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 AUTHORIZED MEMBER Title AUTHORIZED MEMBER

Name KRISTINA, KATT Name BEN, KATT

Address 3263 LAKESHORE DRIVE Address 3263 LAKESHORE DRIVE
City-State-Zip: FORT PIERCE FL 34949 City-State-Zip: FORT PIERCE FL 34949

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: KRISTINA KATT MANAGER