

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000056455

**Entity Name:** LYNNE BROWN CONSULTING, LLC

**Current Principal Place of Business:**

4316 S. OCEAN BLVD.  
1S  
HIGHLAND BEACH, FL 33487

**Current Mailing Address:**

4316 S. OCEAN BLVD.  
1S  
HIGHLAND BEACH, FL 33487

**FEI Number:** 45-2484237

**Certificate of Status Desired:** No

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

BROWN, LYNNE  
4316 S. OCEAN BLVD.  
1S  
HIGHLAND BEACH, FL 33487 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 MGR  
Name BROWN, LYNNE  
Address 4316 S. OCEAN BLVD., #1S  
City-State-Zip: HIGHLAND BEACH FL 33487

*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:** LYNNE BROWN

**MEMBER**

**04/10/2015**

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

\_\_\_\_\_  
Date