

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000081478

**Entity Name:** SOLANGE'S LLC

**Current Principal Place of Business:**

119 BROAD ST  
TITUSVILLE, FL 32796

**Current Mailing Address:**

119 BROAD ST  
TITUSVILLE, FL 32796

**FEI Number:** 45-2780922

**Certificate of Status Desired:** Yes

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

ALFONSO, SOLANGE  
942 CHRISTI CT  
TITUSVILLE, FL 32796 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 ALFONSO, SOLANGE  
Address 942 CHRISTI CT  
City-State-Zip: TITUSVILLE FL 32796

Title MGR  
Name MEDINA, MIGUEL A  
Address 942 CHRISTI CT  
City-State-Zip: TITUSVILLE FL 32796

Title MGRM  
Name ALFONSO, MIRNA V  
Address 254 BREAKAWAY TRAIL  
City-State-Zip: TITUSVILLE FL 32780

*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:** MIGUEL A. MEDINA

MGR

05/01/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date