

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000095758

Entity Name: 10,000 ISLANDS OUTFITTERS, LLC

Current Principal Place of Business:

C/O PAUL NOCIFORA
550 PORT-O-CALL WAY
NAPLES, FL 34102

Current Mailing Address:

C/O PAUL NOCIFORA
550 PORT-O-CALL WAY
NAPLES, FL 34102

FEI Number: 45-3183327

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLASP, INC.
3001 TAMIAMI TRAIL NORTH
SUITE 400
NAPLES, FL 34103 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 NOCIFORA, PAUL
Address C/O PAUL NOCIFORA
550 PORT-O-CALL WAY
City-State-Zip: NAPLES FL 34102

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: PAUL NOCIFORA

MEMBER

03/11/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date