

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000104857

**Entity Name:** FELICIANI & SONS, LLC

**Current Principal Place of Business:**

401 E LAS OLAS BOULEVARD  
115  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

401 E LAS OLAS BOULEVARD  
115  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** 99-0369477

**Certificate of Status Desired:** Yes

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

FELICIANI, GIOVANNI  
1903 SILVERBELL TERRACE  
WESTON, FL 33327 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 FELICIANI, GIOVANNI  
Address 1903 SILVERBELL TERRACE  
City-State-Zip: WESTON FL 33327

Title MGRM  
Name FELICIANI, CLAUDIA M  
Address 1903 SILVERBELL TERRACE  
City-State-Zip: WESTON FL 33327

Title MGRM  
Name FELICIANI, GIOVANNI L  
Address 9725 N.W. 52ND STREET  
City-State-Zip: DORAL FL 33178

*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:** CLAUDIA M FELICIANI

MRS

04/25/2014

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

\_\_\_\_\_ Date