## 2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L11000113894

Entity Name: STUDIOPLUS, LLC

**FILED** Jun 22, 2015 **Secretary of State** CC5578926527

**Current Principal Place of Business:** 

12730 NEW BRITTANY BLVD., STE. 606

FORT MYERS. FL 33907

**Current Mailing Address:** 

12730 NEW BRITTANY BLVD., STE. 606 FORT MYERS. FL 33907 US

FEI Number: 45-3477554 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LENDINO, MIKE 12730 NEW BRITTANY BLVD SUITE 606 FORT MYERS, FL 33907 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: MIKE LENDINO 06/22/2015

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title MGR

Name LENDINO, MIKE Name BARNES, SUZANNE Address 12730 NEW BRITTANY BLVD. STE 606 Address 2555 TEMPLE TRAIL

City-State-Zip: WINTER PARK FL 32789 City-State-Zip: FORT MYERS FL 33907

Title **MGRM** 

**MGRM** Title ROMANELLO, DAMON Name

SOTTONG, THEODORE Name

Address 12730 NEW BRITTANY BLVD SUITE 12730 NEW BRITTANY BLVD SUITE Address

City-State-Zip:

FORT MYERS FL 33907 FORT MYERS FL 33907 City-State-Zip:

Title **MANAGER** DONTJE, JASON Name

Address 12730 NEW BRITTANY BLVD., STE.

FORT MYERS FL 33907 City-State-Zip:

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.

06/22/2015 SIGNATURE: MIKE LENDINO **CFO**