

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000113894

Entity Name: STUDIOPLUS, LLC**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:** Yes**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

01/05/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	LENDINO, MIKE
Address	12730 NEW BRITTANY BLVD. STE 606
City-State-Zip:	FORT MYERS FL 33907

Title	MGRM
Name	ROMANELLO, DAMON
Address	12730 NEW BRITTANY BLVD SUITE 606
City-State-Zip:	FORT MYERS FL 33907

Title	MANAGER
Name	DONTJE, JASON
Address	12730 NEW BRITTANY BLVD., STE. 606
City-State-Zip:	FORT MYERS FL 33907

Title	MANAGER
Name	PEREZ-JIMENEZ, JOSE ANTONIO
Address	12730 NEW BRITTANY BLVD., STE. 606
City-State-Zip:	FORT MYERS FL 33907

Title	MGR
Name	YOUNG, WAYNE
Address	941 WEST MORSE BLVD STE 100
City-State-Zip:	WINTER PARK FL 32789

Title	AMBR
Name	RIOS, ALEX
Address	2211 E 7TH AVENUE
City-State-Zip:	TAMPA FL 33605

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: MIKE LENDINO

MANAGER

01/05/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date