

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000119291

**Entity Name:** REP IT MARKETING, LLC

**Current Principal Place of Business:**

5887 NW 66TH WAY  
PARKLAND, FL 33067

**Current Mailing Address:**

5887 NW 66TH WAY  
PARKLAND, FL 33067 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ADAM I SKOLNIK, PA  
1761 WEST HILLSBORO BOULEVARD  
SUITE 201  
DEERFIELD BEACH, FL 33442 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              | Title           | MGRM              |
| Name            | GOLD, JEFF        | Name            | GOLD, ERICA       |
| Address         | 5887 NW 66TH WAY  | Address         | 5887 NW 66TH WAY  |
| City-State-Zip: | PARKLAND FL 33067 | City-State-Zip: | PARKLAND FL 33067 |

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:** /S/ ADAM I. SKOLNIK, ESQ. ON BEHALF OF JEFF  
GOLD

RA/POA FOR MGRM

02/18/2014

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

\_\_\_\_\_  
Date