

2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L11000133428

Entity Name: TOMI TIPI LLC**Current Principal Place of Business:**690 LONE PINE LANE
WESTON, FL 33327**Current Mailing Address:**690 LONE PINE LANE
WESTON, FL 33327**FEI Number:** 99-0371158**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROSALES, ARIEH
1830 S OCEAN DR UNIT 1802
HALLANDALE BEACH, FL 33009 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:** ARIEH ROSALES

09/28/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	ROSALES, ARIEH	Name	ROSALES, ABRAHAM
Address	690 LONE PINE LANE	Address	690 LONE PINE LANE
City-State-Zip:	WESTON FL 33327	City-State-Zip:	WESTON FL 33327
Title	MGR	Title	MGR
Name	ROSALES, JOSY	Name	ROSALES, MOISES
Address	690 LONE PINE LANE	Address	690 LONE PINE LANE
City-State-Zip:	WESTON FL 33327	City-State-Zip:	WESTON FL 33327
Title	MGR		
Name	ROSALES, BENJAMIN		
Address	690 LONE PINE LANE		
City-State-Zip:	WESTON FL 33327		

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: ARIEH ROSALES**MANAGER**

09/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date