

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000051875

**Entity Name:** FALEN CONSULTING, LLC

**Current Principal Place of Business:**

322 LAKE MARIAM BLVD.  
WINTER HAVEN, FL 33884

**Current Mailing Address:**

322 LAKE MARIAM BLVD.  
WINTER HAVEN, FL 33884

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

FALEN, JUDI  
322 LAKE MARIAM BLVD.  
WINTER HAVEN, FL 33884 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 MGR  
Name FALEN, JUDI  
Address 322 LAKE MARIAM BLVD.  
City-State-Zip: WINTER HAVEN FL 33884

Title MGRM  
Name FALEN, ROBERT  
Address 322 LAKE MARIAM BLVD.  
City-State-Zip: WINTER HAVEN FL 33884

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JUDI FALEN

**MANAGER**

**05/01/2013**

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

\_\_\_\_\_  
Date