## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000057775

Entity Name: THE IMPROV EFFECT, LLC

**Current Principal Place of Business:** 

1024 BUCKBEAN BRANCH LANE WEST

SAINT JOHNS. FL 32259

**Current Mailing Address:** 

1024 BUCKBEAN BRANCH LANE WEST SAINT JOHNS. FL 32259

FEI Number: 36-4732174 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRANT, ABRAHAM, REITER, MCCORMICK & JOHNSON, P.A. 50 NORTH LAURA STREET, SUITE 2750 JACKSONVILLE, FL 32202 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

**FILED** Mar 22, 2015

**Secretary of State** 

CC5287649306

## Authorized Person(s) Detail:

**OWNER** Title

SHTERNSHUS, JESSICA C Name

Address 1024 BUCKBEAN BRANCH LANE

WEST

City-State-Zip: SAINT JOHNS FL 32259

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: JESSICA SHTERNSHUS

**OWNER** 

03/22/2015

Date