

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000061805

**Entity Name:** GENVENTIONS LLC

**Current Principal Place of Business:**

8547 SUGAR PALM CT.  
ORLANDO, FL 32835

**Current Mailing Address:**

8547 SUGAR PALM CT.  
ORLANDO, FL 32835

**FEI Number: 45-5248196**

**Certificate of Status Desired: No**

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

AUSTIN, WILLIS R  
8547 SUGAR PALM CT.  
ORLANDO, FL 32835 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	AUSTIN, ROBERT	Name	AUSTIN, SHERRY L
Address	697 SOUTH NC 111 HWY	Address	697 SOUTH NC 111 HWY
City-State-Zip:	CHINQUAPIN NC 28521	City-State-Zip:	CHINQUAPIN NC 28521

*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: ROBERT AUSTIN**

**MGRM**

**04/27/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date