

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000062868

**Entity Name:** TIDE AND HORNS LLC

**Current Principal Place of Business:**

4715 GRANTS MILL DR  
LYNN HAVEN, FL 32444

**Current Mailing Address:**

4715 GRANTS MILL DR  
LYNN HAVEN, FL 32444

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

KEVIN M. HELMICH, P.A.  
4405 COMMONS DRIVE EAST  
SUITE 102  
DESTIN, FL 32541 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:** KEVIN M. HELMICH, ESQ.

04/25/2013

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                     |                 |                         |
|-----------------|---------------------|-----------------|-------------------------|
| Title           | MGR                 | Title           | MGR                     |
| Name            | CHRISTENSEN, EVAN   | Name            | ALLEN, ANDREW           |
| Address         | 4715 GRANTS MILL DR | Address         | P O BOX 611187          |
| City-State-Zip: | LYNN HAVEN FL 32444 | City-State-Zip: | ROSEMARY BEACH FL 32461 |

*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:** ANDREW ALLEN

**MANAGER**

04/25/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date