

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000076829

Entity Name: T&S DISTRIBUTORS MANAGEMENT, LLC

Current Principal Place of Business:

5805 BLUE LAGOON DRIVE
SUITE 220
MIAMI, FL 33126

Current Mailing Address:

5805 BLUE LAGOON DRIVE
SUITE 220
MIAMI, FL 33126 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE ACCESS, INC.
236 EAST 6TH AVENUE
TALLAHASSEE, FL 32303 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 T&S DISTRIBUTORS, LLC
Address 5805 BLUE LAGOON DRIVE, SUITE
220
City-State-Zip: MIAMI FL 33126

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: T & S DISTRIBUTORS MANAGEMENT

MGR

04/05/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date