

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000152724

Entity Name: OFFICE FUNCTIONS,LLC

Current Principal Place of Business:

1857 WELLS RD.
ORANGE PARK, FL 32073

Current Mailing Address:

9838 OLD BAYMEADOWS RD.
316
JACKSONVILLE, FL 32256 US

FEI Number: 46-1513792

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLITON, JANET
9838 OLD BAYMEADOWS RD. #316
JACKSONVILLE, FL 32256 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 BLITON, JANET
Address 9838 OLD BAYMEADOWS RD. 3316
City-State-Zip: JACKSONVILLE FL 32256

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: JANET BLITON

MANAGER

04/25/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date