

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000011415

Entity Name: MOORES STREAM, LLC

Current Principal Place of Business:

BOX 12517
TALLAHASSEE, FL 32317

Current Mailing Address:

BOX 12517
TALLAHASSEE, FL 32317

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCMURRY, CHARLES ESQ
910 DUVAL STREET
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 MGRM
Name MOORE, MARK
Address BOX 12517
City-State-Zip: TALLAHASSEE FL 32317

Title MGRM
Name MOORE, HIS WIFE, LISA
Address BOX 12517
City-State-Zip: TALLAHASSEE FL 32317

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: MARK MOORE

AMBR

05/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date