## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000025796

Entity Name: DIGITAL GRASS, LLC

**Current Principal Place of Business:** 

14311 BISCAYNE BLVD.

#614101

NORTH MIAMI, FL 33181

**Current Mailing Address:** 

14311 BISCAYNE BLVD #614101

NORTH MIAMI, FL 33181 US

FEI Number: 27-2571425 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FILLYAU, DANTE 401 E. LAS OLAS BLVD SUITE 130-542

FT. LAUDERDALE, FL 33301 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:

Address

Address

Electronic Signature of Registered Agent

Date

**FILED** Mar 22, 2017

**Secretary of State** 

CC0631143375

## Authorized Person(s) Detail:

litle	MGR	Title	MGR
Name	FILLYAU, DANTE	Name	HALL,

HALL, MICHAEL FILLYAU, DANTE Name

> 14311 BISCAYNE BLVD. Address 14311 BISCAYNE BLVD. #614101 #614101

City-State-Zip: NORTH MIAMI FL 33181 City-State-Zip: NORTH MIAMI FL 33181

Title **AUTHORIZED MEMBER** Title **AUTHORIZED MEMBER** Name SORRELL, ANN-MARIE Name STIRRUP, LATOYA

Address 14311 BISCAYNE BLVD. Address 14311 BISCAYNE BLVD.

#614101 #614101

City-State-Zip: NORTH MIAMI FL 33181 City-State-Zip: NORTH MIAMI FL 33181

Title **AUTHORIZED MEMBER** Title **AUTHORIZED MEMBER** BEDOYA, UHRIEL DANIEL, ALECIA C Name Name

Address 14311 BISCAYNE BLVD. Address 14311 BISCAYNE BLVD.

#614101 #614101

City-State-Zip: NORTH MIAMI FL 33181 City-State-Zip: NORTH MIAMI FL 33181

**AUTHORIZED MEMBER** Title AUTHORIZED MEMBER Title

Name NELSON, SOPHIA Name DIXON, KEACHEA

> 14311 BISCAYNE BLVD. 14311 BISCAYNE BLVD. #614101 #614101

NORTH MIAMI FL 33181 NORTH MIAMI FL 33181 City-State-Zip: City-State-Zip:

## Continues on page 2

Address

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: DANTE FILLYAU **MGR** 03/22/2017

## **Authorized Person(s) Detail Continued:**

Title AUTHORIZED MEMBER Name BEARDEN, JAMES

14311 BISCAYNE BLVD. #614101 Address

City-State-Zip: NORTH MIAMI FL 33181