

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000042810

**Entity Name:** 349, LLC

**Current Principal Place of Business:**

119 NORTH 9TH AVENUE  
PENSACOLA, FL 32502

**Current Mailing Address:**

POST OFFICE BOX 670  
PENSACOLA, FL 32591

**FEI Number:** 46-2398590

**Certificate of Status Desired:** No

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

HIGHTOWER, DAVID E  
HIGHTOWER LAW FIRM  
119 NORTH PALAFOX STREET  
PENSACOLA, FL 32502 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           MANAGER  
Name           PAIR, MATTHEW  
Address        POST OFFICE BOX 670  
City-State-Zip: PENSACOLA FL 32591

*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:** MATTHEW PAIR

MANAGER

04/29/2014

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date