## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000053955

**Entity Name: CREDIT POINTS LLC** 

**Current Principal Place of Business:** 

6917 NARCOOSSEE RD

STE 700 ORLANDO, FL 32822

**Current Mailing Address:** 

6917 NARCOOSSEE RD STE 700

ORLANDO, FL 32822 US

FEI Number: 46-2488489 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TOLEDO, VANESSA 6917 NARCOOSSEE RD STE 700 ORLANDO, FL 32822 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

**FILED** Apr 12, 2016

**Secretary of State** 

CC3676699535

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

TOLEDO, VANESSA Name Name HERNANDEZ, NITZA J 6917 NARCOOSSEE RD 6917 NARCOOSSEE RD Address Address

**STE 700 STE 700** 

City-State-Zip: ORLANDO FL 32822 City-State-Zip: ORLANDO FL 32822

Title **MGRM** 

Name FUENTES, HECTOR MANUEL

Address 6917 NARCOOSSEE RD

**STE 700** 

City-State-Zip: ORLANDO FL 32822

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: VANESSA TOLEDO

Electronic Signature of Signing Authorized Person(s) Detail

VICE PRESIDENT

04/12/2016 Date