

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000059208

Entity Name: LIMO CYCLE FLORIDA LLC

Current Principal Place of Business:

609 N LONGVIEW PLACE
LONGWOOD, FL 32779

Current Mailing Address:

PO BOX 161087
ALTAMONTE SPRINGS, FL 32716

FEI Number: 46-2985798

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TISHMAN, STEVE
609 N LONGVIEW PLACE
LONGWOOD, FL 32779 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 STEVE, TISHMAN
Address 609 N LONGVIEW PLACE
City-State-Zip: LONGWOOD FL 32779

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: STEVE TISHMAN

MANAGING PARTNER

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date