

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000064374

**Entity Name:** CHALOUPKA SALES, LLC

**Current Principal Place of Business:**

311 NORTH KNOWLES AVE  
#407  
WINTER PARK, FL 32789

**Current Mailing Address:**

311 NORTH KNOWLES AVE  
#407  
WINTER PARK, FL 32789 US

**FEI Number:** 46-2737679

**Certificate of Status Desired:** No

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

CHALOUPKA, CHRISTINE  
311 NORTH KNOWLES AVE  
#407  
WINTER PARK, FL 32789 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 CHALOUPKA, CHRISTINE  
Address 311 NORTH KNOWLES AVE #407  
City-State-Zip: WINTER PARK FL 32789

*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:** CHRISTINE CHALOUPKA

MGRM

02/23/2014

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

\_\_\_\_\_  
Date