

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000080847

Entity Name: HAS RIBS, LLC

Current Principal Place of Business:

5040 W THARPE ST
STE 306
TALLAHASSEE, FL 32303

Current Mailing Address:

5040 W THARPE ST
STE 306
TALLAHASSEE, FL 32303 US

FEI Number: 46-3082120

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, HAROLD A
5040 W THARPE ST
STE 306
TALLAHASSEE, FL 32303 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 OWNER
Name SMITH, HAROLD
Address 5040 W THARPE ST
 STE 306
City-State-Zip: TALLAHASSEE FL 32303

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: HAROLD A SMITH

OWNER

01/29/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date