## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000087365
Entity Name: AFMODEL, LLC

Entity Name: AFMODEL, LLC

**Current Principal Place of Business:** 

7203 N. MOBLEY RD ODESSA, FL 33556

**Current Mailing Address:** 

P.O. BOX 25531

TAMPA. FL 33622-5531 US

FEI Number: 46-5193612 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PLOUCHER, RAYMOND A 7203 N. MOBLEY RD ODESSA, FL 33556 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: RAYMOND A PLOUCHER 03/23/2015

Electronic Signature of Registered Agent

Date

FILED Mar 23, 2015

**Secretary of State** 

CC2499062276

Authorized Person(s) Detail:

Title MGRM Title MGRM

NamePLOUCHER, RAYMOND ANameGILMORE, MICHAELAddress7203 N. MOBLEY RD.Address208 W. COMANCHE AVE.

City-State-Zip: ODESSA FL 33556 City-State-Zip: TAMPA FL 33604

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: RAYMOND A PLOUCHER

MANAGING MEMBER

03/23/2015