

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000095719

Entity Name: RAGGAMUFFIN LLC**Current Principal Place of Business:**572 MOONBEAM RD.
APOPKA, FL 32712**Current Mailing Address:**2173 EAGLES REST DRIVE
APOPKA, FL 32712 US**FEI Number:** 46-3124323**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MURDOCK, JOY
2173 EAGLES REST DRIVE
APOPKA, FL 32712 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, CEO
Name MURDOCK, JOY
Address 2173 EAGLES REST DRIVE
City-State-Zip: APOPKA FL 32712

Title CFO
Name CORY, MURDOCK J
Address 2173 EAGLES REST DRIVE
City-State-Zip: APOPKA FL 32712

Title PRESIDENT
Name JAMES, POWELL W SR.
Address 572 MOONBEAM RD.
City-State-Zip: APOPKA FL 32712

Title AUTHORIZED MEMBER, DIRECTOR
Name KATIE, POWELL
Address 2173 EAGLES REST DRIVE
City-State-Zip: APOPKA FL 32712

Title DIRECTOR, SECRETARY, MANAGER
Name TROESCH, NATALIA R
Address 34835 CR 439
City-State-Zip: EUSTIS FL 32736

Title AUTHORIZED REPRESENTATIVE
Name JAMES, POWELL W JR.
Address 2173 EAGLES REST DRIVE
City-State-Zip: APOPKA FL 32712

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: JOY MURDOCK

CEO

03/03/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date