

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000114141

Entity Name: SLB SERVICES GROUP, LLC

Current Principal Place of Business:

100 NORTH TAMPA STREET - SUITE2700
C/O R. J. WOLFE
TAMPA, FL 33602-5810

Current Mailing Address:

P.O. BOX 1066
VALRICO, FL 33595-1066 US

FEI Number: 27-3160145

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

F & L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 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 BRESSE, MICHAEL P
Address P.O. BOX 1066
City-State-Zip: VALRICO FL 33595-1066

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: MICHAEL P. BRESSE

MANAGER

01/08/2015

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date