

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000118103

**Entity Name:** MITCH STOVER CONSULTING, LLC

**Current Principal Place of Business:**

37 COMPASS POINT WAY SOUTH  
COMPASS POINT II, UNIT 315  
WATERSOUND, FL 32461

**Current Mailing Address:**

P.O. BOX 613344  
WATERSOUND, FL 32461

**FEI Number:** 46-3544029

**Certificate of Status Desired:** No

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

STOVER, MITCHELL L  
37 COMPASS POINT WAY SOUTH  
COMPASS POINT II, UNIT 315  
WATERSOUND, FL 32461 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 STOVER, MITCHELL L  
Address 37 COMPASS POINT WAY SOUTH,  
UNIT 315  
City-State-Zip: WATERSOUND FL 32461

*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:** MITCHELL STOVER

**PRESIDENT**

**04/16/2016**

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

\_\_\_\_\_  
Date