

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000138902

**Entity Name:** MOLINE BESSETTE LLC

**Current Principal Place of Business:**

6900 TURKEY LAKE ROAD  
SUITE 1-3  
ORLANDO, FL 32819

**Current Mailing Address:**

6900 TURKEY LAKE ROAD  
SUITE 1-3  
ORLANDO, FL 32819 US

**FEI Number:** 46-3783844

**Certificate of Status Desired:** No

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

MOLINE, AMY  
6900 TURKEY LAKE ROAD  
SUITE 1-3  
ORLANDO, FL 32819 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	Title	MGR
Name	MOLINE, AMY	Name	BESSETTE, CHRISTOPHER
Address	6900 TURKEY LAKE ROAD SUITE 1-3	Address	6900 TURKEY LAKE ROAD SUITE 1-3
City-State-Zip:	ORLANDO FL 32819	City-State-Zip:	ORLANDO FL 32819

*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:** AMY MOLINE

**MANAGER**

**01/09/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date