

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000147480

**Entity Name:** FDG LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

1781 RIVER ROAD #2  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

1781 RIVER ROAD #2  
JACKSONVILLE, FL 32207 US

**FEI Number:** 46-3952355

**Certificate of Status Desired:** No

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

DA CUNHA, FABIEN  
1781 RIVER ROAD #2  
JACKSONVILLE, FL 32207 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 DA CUNHA, FABIEN  
Address 1781 RIVER ROAD #2  
City-State-Zip: JACKSONVILLE FL 32207

Title MGRM  
Name GOFFINET, DAVID  
Address 1781 RIVER ROAD #2  
City-State-Zip: JACKSONVILLE FL 32207

*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:** FABIEN DA CUNHA

MGR

03/25/2016

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

\_\_\_\_\_ Date