## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000163671

Entity Name: RELOAD LLC

### **Current Principal Place of Business:**

1375 S FT HARRISON AVE CLEARWATER, FL 33756

### **Current Mailing Address:**

PO BOX 2256 CLEARWATER, FL 33757-2256 US

## FEI Number: 32-0423867

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

MAVRAKIS, PATRICIA 1375 S FT HARRISON AVE CLEARWATER, FL 33756 US Certificate of Status Desired: No

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

### Authorized Person(s) Detail :

Title	MGR	Title	AMBR
Name	CAPITAL RESOURCES OF FLORIDA	Name	BOESCH, DANIEL E
Address	LLC 1375 S FT HARRISON AVE	Address	PO BOX 2256
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33757-2256
City-State-Zip.	CLEARWATER FL 33750		
Title	AMBR		
Name	BOESCH, DONALD W		
Address	PO BOX 2256		
City-State-Zip:	CLEARWATER FL 33757-2256		

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: CAPITAL RESOURCES OF FLORIDA LLC

MANAGER

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Feb 13, 2017 Secretary of State CC6367954309