# 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 DEQUATTRO

Electronic Signature of Signing Authorized Person(s) Detail

### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000173997

Entity Name: D & D PIZZA OF LONGWOOD LLC

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

2170 WEST STATE ROAD434 STE 170 LONGWOOD, FL 32779

#### **Current Mailing Address:**

2170 WEST STATE ROAD 434 STE 170 LONGWOOD, FL 32779 US

#### FEI Number: 46-4334856

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

DEQUATTRO, MICHAEL 2170 W. STATE ROAD434 STE 170 LONGWOOD, FL 32779 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

Title	MGRM		Title	MGRM
Name	DEQUATTRO, MICHAEL		Name	ARVANETES, CONSTANTINOS
Address	2170 W. STATE ROAD 434	STE 170	Address	P. O. BOX 56673
City-State-Zip:	LONGWOOD FL 32779		City-State-Zip:	NEW ORLEANS LA 70156

## FILED Jan 13, 2015 Secretary of State CC3044497809

Certificate of Status Desired: No

01/13/2015 Date

Date

CEO