

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000019084

Entity Name: LUMOBID, LLC

Current Principal Place of Business:

6118 NW GINGER LANE
PORT ST LUCIE, FL 34986

Current Mailing Address:

6118 NW GINGER LANE
PORT ST LUCIE, FL 34986

FEI Number: 47-2171663

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLSTON, JAN
6118 NW GINGER LANE
PORT ST LUCIE, FL 34986 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
Name GRIER, JAMILIA
Address 6118 NW GINGER LANE
City-State-Zip: PORT ST LUCIE FL 34986

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: JAMILIA GRIER

MANAGER

02/16/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date