

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000029901

**Entity Name:** 3899 SHUTTERFLY WAY, LLC

**Current Principal Place of Business:**

12161 KEN ADAMS WAY  
209  
WELLINGTON, FL 33414

**Current Mailing Address:**

12161 KEN ADAMS WAY  
209  
WELLINGTON, FL 33414 US

**FEI Number:** 47-3090844

**Certificate of Status Desired:** No

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

WITKOWSKI, RONALD ESQ.  
12161 KEN ADAMS WAY  
209  
WELLINGTON, FL 33414 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 MANAGER  
Name SCHAUFELD, HALEY  
Address 108 LOUDOUN ST., SW  
City-State-Zip: LEESBURG VA 20175

Title MANAGER  
Name VOSS, STEVEN J.  
Address 108 LOUDOUN ST., SW  
City-State-Zip: LEESBURG VA 20175

Title MANAGER  
Name SCHAUFELD, FREDRICK D. TR.  
Address 108 LOUDOUN ST., SW  
City-State-Zip: LEESBURG VA 20175

Title AUTHORIZED REPRESENTATIVE  
Name WITKOWSKI, RONALD  
Address 12161 KEN ADAMS WAY  
City-State-Zip: WELLINGTON FL 33414

*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:** RONALD WITKOWSKI, ESQ.

AR

01/26/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date