

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000065166

**Entity Name:** TORTAS AND FLATS, LLC

**Current Principal Place of Business:**

1639 CHALLEN AVENUE  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

1639 CHALLEN AVENUE  
JACKSONVILLE, FL 32205 US

**FEI Number:** 46-5488495

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAK COURT  
A  
TAMPA, FL 33612 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            AMBR  
Name            MURRAY, SCOT F  
Address        1639 CHALLEN AVENUE  
City-State-Zip: JACKSONVILLE FL 32205

Title            AMBR  
Name            YOHE, KATHLEEN A  
Address        1639 CHALLEN AVENUE  
City-State-Zip: JACKSONVILLE FL 32205

*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:** KATHLEEN A. YOHE

**MANAGING MEMBER**

**03/07/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date