

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000066259

Entity Name: TRANSITION WHALE, LLC

Current Principal Place of Business:

4380 OAKES ROAD
SUITE 802
DAVIE, FL 33314

Current Mailing Address:

4380 OAKES ROAD
SUITE 802
DAVIE, FL 33314

FEI Number: 46-5467890

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, DAVID A
5742 SW 130 AVENUE
SW RANCHES, FL 33330 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 MBR
Name LOPEZ, DAVID
Address 4380 OAKES ROAD #802
City-State-Zip: DAVIE FL 33314

Title MBR
Name TRALONGO, KEN
Address 4380 OAKES ROAD #802
City-State-Zip: DAVIE FL 33314

Title MBR
Name WINGFIELD, STEVE
Address 4380 OAKES ROAD #802
City-State-Zip: DAVIE FL 33314

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: DAVID LOPEZ

MBR

01/08/2015

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date