## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L14000110914

## Entity Name: REVO DISTRIBUTION LLC

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

3344 ROBERT TRENT JONES DR #103 ORLANDO. FL 32835

## **Current Mailing Address:**

PO BOX 616640 ORLANDO, FL 32861-6640

## FEI Number: 47-1404252

## Name and Address of Current Registered Agent:

NOUFAL, RAMI 3344 ROBERT TRENT JONES DR #103 ORLANDO, FL 32835 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

## Authorized Person(s) Detail :

Title	AMBR	Title	AUTHORIZED MEMBER
Name	NOUFAL, RAMI	Name	ELIYAN, GUSSAN
Address	3344 ROBERT TRENT JONES DR #103	Address	611 EVELYN AVE
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ALBANY CA 98103

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: RAMI NOUFAL

AUTHORIZED MEMBER 04/09

04/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Apr 09, 2015 Secretary of State CC6178228721

Certificate of Status Desired: Yes

Date