

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000111414

**Entity Name:** 2718 W UNION LLC

**Current Principal Place of Business:**

2718 W UNION STREET  
B  
TAMPA, FL 33607

**Current Mailing Address:**

PO BOX 4954  
TAMPA, FL 33677

**FEI Number:** 47-2410067

**Certificate of Status Desired:** No

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

GEORGE, TRIMIKLINIOTIS  
2718 W UNION STREET  
B  
TAMPA, FL 33607 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            GEORGE, TRIMIKLINIOTIS  
Address        2718 W UNION STR. APT. B  
City-State-Zip: TAMPA FL 33607

Title            AMBR  
Name            GEORGIA, TRIMIKLINIOTIS  
Address        2219 STEINWAY STR.  
City-State-Zip: ASTORIA NY 11105

*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:** GEORGE TRIMIKLINIOTIS

AMBR

02/08/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date