

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000124798

**Entity Name:** SHAOLIN-DO BRANDON, LLC

**Current Principal Place of Business:**

915 S PARSONS AVE, SUITE A  
BRANDON, FL 33511

**Current Mailing Address:**

915 S PARSONS AVE, SUITE A  
BRANDON, FL 33511 US

**FEI Number: 47-1836404**

**Certificate of Status Desired: Yes**

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

CLEMMER, KELLIE  
1411 DEW BLOOM RD  
VALRICO, FL 33594 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	Title	AMBR
Name	CLEMMER, KELLIE	Name	CLEMMER, MICHAEL
Address	1411 DEW BLOOM RD	Address	1411 DEW BLOOM RD
City-State-Zip:	VALRICO FL 33594	City-State-Zip:	VALRICO FL 33594

*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: KELLIE E CLEMMER**

**AMBR**

**04/28/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date