

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000152445

**Entity Name:** ELENA LAROCHELLE, LLC

**Current Principal Place of Business:**

7109 YACHT BASIN AVE  
434  
ORLANDO, FL 32835

**Current Mailing Address:**

7109 YACHT BASIN AVE  
434  
ORLANDO, FL 32835

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

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

LAROCHELLE, ELENA  
7109 YACHT BASIN AVE  
434  
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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           ELENA , LAROCHELLE  
Address        7109 YACHT BASIN AVE 434  
City-State-Zip: ORLANDO FL 32835

*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: ELENA LAROCHELLE**

**M**

**08/03/2015**

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

\_\_\_\_\_  
Date