

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000016168

Entity Name: 4397 BARBRIDGE LLC

Current Principal Place of Business:

4397 BARBRIDGE RD
WEST PALM BEACH, FL 33406

Current Mailing Address:

PO BOX 541473
GREENACRES, FL 33454

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE LAW OFFICE OF TIMOTHY H OLEEN PA
21301 POWERLINE ROAD
SUITE #106
BOCA RATON, FL 33433 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 MGR
Name RIVERA, JULIO C
Address 6850 FINAMORE CIRCLE
City-State-Zip: LAKE WORTH FL 33467

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: JULIO C RIVERA

MGR

04/28/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date