

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000018464

**Entity Name:** 5IFTY & 5IVE, LLC

**Current Principal Place of Business:**

227 SOUTH ORLANDO AVENUE SUITE B-1  
WINTER PARK, FL 32789

**Current Mailing Address:**

227 SOUTH ORLANDO AVENUE SUITE B-1  
WINTER PARK, FL 32789

**FEI Number:** 27-0666848

**Certificate of Status Desired:** No

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

VENDENBERG, LUCAS  
227 SOUTH ORLANDO AVENUE SUITE B-1  
WINTER PARK, FL 32789 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 VANDENBERG, LUCAS  
Address 227 SOUTH ORLANDO AVENUE SUITE B-1  
City-State-Zip: WINTER PARK FL 32789

Title MGR  
Name VANDENBERG, LUCAS  
Address 227 SOUTH ORLANDO AVENUE SUITE B-1  
City-State-Zip: WINTER PARK FL 32789

Title MGR  
Name VANDENBERG, JENNA  
Address 227 SOUTH ORLANDO AVENUE SUITE B-1  
City-State-Zip: WINTER PARK FL 32789

Title AMBR  
Name VANDENBERG, JENNA  
Address 227 SOUTH ORLANDO AVENUE SUITE B-1  
City-State-Zip: WINTER PARK FL 32789

*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:** LUCAS VANDENBERG

AMBR

04/06/2016

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

\_\_\_\_\_  
Date