

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000033846

**Entity Name:** 9915 AETNA LANE, LLC

**Current Principal Place of Business:**

4229 LAFAYETTE CENTER DR.  
#1625  
CHANTILLY, VA 20151

**Current Mailing Address:**

4229 LAFAYETTE CENTER DR.  
#1625  
CHANTILLY, VA 20151

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

VANDERLEELIE, SHANE  
3106 W. OSBORNE AVE.  
TAMPA, FL 33614 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 ANG SUNSHINE, LLC  
Address 4229 LAFAYETTE CENTER DR. #1625  
City-State-Zip: CHANTILLY VA 20151

*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:** GANGA BETHI \_\_\_\_\_

MANAGING MEMBER

01/16/2017

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date