# that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JASON LAPAGLIA

Electronic Signature of Signing Authorized Person(s) Detail

COCONUT CREEK, FL 33073 **Current Mailing Address:** 

#### 4105 NW 59TH ST COCONUT CREEK, FL 33073 US

#### FEI Number: 47-3867625

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

CHOICE REALTY GROUP 4105 NW 59TH ST COCONUT CREEK, FL 33073 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:

4105 NW 59TH ST

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	LAPAGLIA, JASON	Name	LAPAGLIA, JEREMY
Address	4105 NW 59TH ST	Address	PO BOX 420812
City-State-Zip:	COCONUT CREEK FL 33073	City-State-Zip:	KISSIMMEE FL 34742

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

03/27/2017 MANAGING PARTNER

Certificate of Status Desired: No

Mar 27, 2017 Secretary of State CC3450495712

FILED

Date

## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L15000076203

#### Entity Name: 14831 TRAPPER ROAD LLC

### **Current Principal Place of Business:**

Date