

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000097314

**Entity Name:** ACQUE CELESTI, LLC

**Current Principal Place of Business:**

840 NE 20TH AVENUE  
FORT LAUDERDALE, FL 33304

**Current Mailing Address:**

840 NE 20TH AVENUE  
FORT LAUDERDALE, FL 33304 UN

**FEI Number:** 47-4315848

**Certificate of Status Desired:** No

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

LOVELL, ROSE ANN  
840 NE 20TH AVENUE  
FORT LAUDERDALE, FL 33304 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 LOVELL, ROSE ANN  
Address 840 NE 20TH AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33304

Title MGR  
Name FARQUHAR, LAURIE A  
Address 840 NE 20TH AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33304

*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:** ROSE ANN LOVELL

**MANAGER**

**03/04/2016**

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

\_\_\_\_\_  
Date