

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000119269

**Entity Name:** DITTOBITE, LLC

**Current Principal Place of Business:**

6 COLUMBINE TRL  
DEBARY, FL 32713

**FILED**  
**Sep 07, 2016**  
**Secretary of State**  
**CC2727390705**

**Current Mailing Address:**

6 COLUMBINE TRL  
DEBARY, FL 32713 US

**FEI Number: 47-4582182**

**Certificate of Status Desired: No**

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

KELLIE, JASON  
6 COLUMBINE TRL  
DEBARY, FL 32713 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	Title	AMBR
Name	KELLIE, JASON	Name	RAMOS, JUAN
Address	6 COLUMBINE TRL	Address	6 COLUMBINE TRL
City-State-Zip:	DEBARY FL 32713	City-State-Zip:	DEBARY FL 32713

Title SECRETARY, AUTHORIZED REPRESENTATIVE  
 Name LEYVA, DILAST  
 Address 6 COLUMBINE TRL  
 City-State-Zip: DEBARY FL 32713

*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: JASON KELLIE**

**PRESIDENT**

**09/07/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date