

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000080868

Entity Name: ADRIANA FRANCESCHINI LLC

Current Principal Place of Business:

5789 CAPE HARBOUR DR
201
CAPE CORAL, FL 33914

Current Mailing Address:

P O BOX 100216
CAPE CORAL, FL 33910

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRANCESCHINI, ADRIANA
5789 CAPE HARBOUR DR
201
CAPE CORAL, FL 33914 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 FRANCESCHINI, ADRIANA
Address P O BOX 100216
City-State-Zip: CAPE CORAL FL 33910

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: ADRIANA FRANCESCHINI

MGR

01/23/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date