

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000087068

**Entity Name:** EMP FLORIST, LLC

**Current Principal Place of Business:**

725 NORTH 3RD STREET  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

725 NORTH 3RD STREET  
JACKSONVILLE BEACH, FL 32250 US

**FEI Number:** 81-2563969

**Certificate of Status Desired:** No

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

HEAD, MOSS, FULTON, & GRIFFIN, P.A.  
1530 BUSINESS CENTER DRIVE  
SUITE 4  
FLEMING ISLAND, FL 32003 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:** JUSTIN G. CERRATO

04/14/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name ELLEN M. PETERSON LIVING TRUST  
Address 725 NORTH 3RD STREET  
City-State-Zip: JACKSONVILLE BEACH FL 32250

*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:** ELLEN PETERSON

AMBR

04/14/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date