

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000144723

Entity Name: 17345 PORTER, LLC

Current Principal Place of Business:

17531 CR 455
MONTVERDE, FL 34756

Current Mailing Address:

PO BOX 560012
MONTVERDE, FL 34756 US

FEI Number: 81-3478533

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARELLANO, KARIN
17531 CR 455
MONTVERDE, FL 34756 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 ARELLANO, KARIN
Address 17531 CR 455
City-State-Zip: MONTVERDE FL 34756

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: KARIN ARELLANO

MANAGER

04/30/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date