

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000187242

**Entity Name:** HCPP COMPANY LLC

**Current Principal Place of Business:**

128 RUE DE SOLFERINO  
APT 35  
LILLE, 59000

**Current Mailing Address:**

128 RUE SOLFERINO  
APT 35  
LILLE, 59000 FR

**FEI Number:** 30-0955258

**Certificate of Status Desired:** No

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

VIVIES & GANEM CPA PA  
700 E DANIA BEACH BLVD.  
STE 202  
DANIA BEACH, FL 33004 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 MGRM  
Name PECHENARD, PATRICK  
Address 128 RUE SOLFERINO  
APT 35  
City-State-Zip: LILLE 59000

*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:** PECHENARD PATRICK

MGRM

01/06/2017

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

\_\_\_\_\_  
Date