

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000007738

Entity Name: TRIPSHOCK ENTERTAINMENT, LLC

Current Principal Place of Business:

35 RED BAY CT.
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

P.O. BOX 2309
SANTA ROSA BEACH, FL 32459 US

FEI Number: 35-2586180

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FISHER, GREG
85 RED BAY CT.
SANTA ROSA BEACH, FL 32459 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
Name EMERALD MEMORIES, INC.
Address 35 RED BAY CT.
City-State-Zip: SANTA ROSA BEACH FL 32459

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: EMERALD MEMORIES

MANAGER

04/08/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date