

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000035006

Entity Name: FULLMOONARISING, LLC

Current Principal Place of Business:

3030 N. ROCKY POINT DR.
STE 150A
TAMPA, FL 33607

Current Mailing Address:

3030 N. ROCKY POINT DR.
STE 150A
TAMPA, FL 33607 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
3030 N. ROCKY POINT DR.
STE 150A
TAMPA, FL 33607 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 AUTHORIZED REPRESENTATIVE
Name REGISTERED AGENTS INC
Address 3030 N. ROCKY POINT DR.
 STE 150A
City-State-Zip: TAMPA FL 33607

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: RILEY PARK

**AUTHORIZED
REPRESENTATIVE**

05/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date