

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000123009

**Entity Name:** DECANES HOLDINGS LLC

**Current Principal Place of Business:**

601 DEL PRADO BOULEVARD NORTH  
SUITE 8  
CAPE CORAL, FL 33909

**Current Mailing Address:**

601 DEL PRADO BOULEVARD NORTH  
SUITE 8  
CAPE CORAL, FL 33909

**FEI Number:** 82-1753565

**Certificate of Status Desired:** No

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

MY REALTY STORY LLC  
601 DEL PRADO BOULEVARD NORTH  
SUITE 8  
CAPE CORAL, FL 33909 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            DECERE, TRAVIS S  
Address        601 DEL PRADO BOULEVARD NORTH  
                 SUITE 8  
City-State-Zip: CAPE CORAL FL 33909

Title            AMBR  
Name            DECERE, KIMBERLY C  
Address        601 DEL PRADO BOULEVARD NORTH  
                 SUITE 8  
City-State-Zip: CAPE CORAL FL 33909

*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:** TRAVIS S DECERE

**MANAGER**

**04/30/2018**

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

\_\_\_\_\_  
Date