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 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 Stat that my name appears above, or on an attachment with all other like empowered.	

SIGNATURE: TRACY WOMACK

Electronic Signature of Signing Authorized Person(s) Detail

Electronic Signature of Registered Agent Authorized Person(s) Detail :

Title	AMBR	Title	MGR
Name	WOMACK, TRACY	Name	DESHEFY, DAWN R
Address	180 MEADOW AVENUE	Address	25801 LA SERRA
City-State-Zip:	ST. AUGUSTINE FL 32084	City-State-Zip:	LAGNUNA HILLS CA 92653

Fitle	AMBR	Title	MGR		
Name	WOMACK, TRACY	Name	DESHEFY, DAWN R		
Address	180 MEADOW AVENUE	Address	25801 LA SERRA		
City-State-Zip:	ST. AUGUSTINE FL 32084	City-State-Zip:	LAGNUNA HILLS CA 92653		

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.

WOMACK, TRACY

ST AUGUSTINE. FL 32084 US FEI Number: 82-2663069

**Current Mailing Address: 180 MEADOW AVENUE** 

## Name and Address of Current Registered Agent:

Entity Name: DAUPHIN FINE ART GLASS LLC

**180 MEADOW AVENUE** ST AUGUSTINE, FL 32084 US

SIGNATURE:

**Current Principal Place of Business:** 180 MEADOW AVE SAINT AUGUSTINE, FL 32084-2249

DOCUMENT# L17000156424

## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## Certificate of Status Desired: No

TRACY WOMACK

03/29/2018

Date

FILED Mar 29, 2018 Secretary of State CC2318446485

Date