

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M12000005582

**Entity Name:** DDP DMO OF FLORIDA, LLC

**Current Principal Place of Business:**

9400 4TH STREET NORTH  
SUITE 200  
ST. PETERSBURG, FL 33702

**Current Mailing Address:**

9400 4TH STREET NORTH  
SUITE 200  
ST. PETERSBURG, FL 33702 US

**FEI Number:** 46-1063959

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 DDP DMO HOLDINGS, LLC  
Address 9400 4TH STREET NORTH  
SUITE 200  
City-State-Zip: ST. PETERSBURG FL 33702

Title CFO  
Name WARDEN, ROBERT  
Address 9400 4TH STREET NORTH  
SUITE 200  
City-State-Zip: ST. PETERSBURG FL 33702

Title GENERAL COUNSEL  
Name KOHN, ELENA ESQ.  
Address 9400 4TH STREET NORTH  
SUITE 200  
City-State-Zip: ST. PETERSBURG FL 33702

Title CEO  
Name COMTE, WILLIAM H  
Address 9400 4TH STREET NORTH  
SUITE 200  
City-State-Zip: ST. PETERSBURG FL 33702

*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:** ELENA KOHN, ESQ.

**GENERAL COUNSEL**

**03/15/2017**

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

\_\_\_\_\_  
Date