

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M9500000226

**Entity Name:** CDT'S ESPEDECO, LLC, L.C.

**Current Principal Place of Business:**

8720 ARAPAHOE VALLEY RD  
LAPORTE, CO 80535

**Current Mailing Address:**

P.O. BOX 760  
LONDONDERRY, VT 05148 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

WHEELER, DOLORES K  
803 SUMMER WINDS LANE  
JUPITER, FL 33458 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 TUTTLEMAGUIRE, ROBIN  
Address 1940 ST ANDREWS CT  
City-State-Zip: OXNARD CA 93036

Title MGRM  
Name TUTTLE, ANNIE LAURIE  
Address 360 ASHEVILLE ROAD  
City-State-Zip: ASHEVILLE NC 28806

Title MGRM  
Name TUTTLE, DINSMORE  
Address 108 N COUNTY RD 5  
City-State-Zip: FORT COLLINS CO 80524

Title MGRM  
Name TUTTLE, VICTORIA  
Address 144 COYOTE CT  
City-State-Zip: BOULDER CO 80302

Title MGRM  
Name TUTTLE, AMELIA  
Address 8720 N. COUNTY RD 23E  
City-State-Zip: LAPORTE CO 80535

Title MGRM  
Name TUTTLE, BETTINA  
Address P.O. BOX 760  
City-State-Zip: LONDONDERRY VT 05148

*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:** ROBIN TUTTLEMAGUIRE

MGRM

03/14/2016

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

\_\_\_\_\_  
Date