

2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A07000001251

Entity Name: BONNIE LOU FAMILY LLLP

Current Principal Place of Business:

8160 N.W. 183 STREET
HIALEAH, FL 33015

Current Mailing Address:

8160 N.W. 183 STREET
HIALEAH, FL 33015 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RARICK, PHILLIP B
6500 COWPEN RD.
204
MIAMI LAKES, FL 33014 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

General Partner Detail :

Document #

Name CALDWELL, BONNIE B

Address 8160 N.W. 183 STREET

City-State-Zip: HIALEAH FL 33015

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BONNIE B. CALDWELL

MGMR

01/11/2015

_____ Electronic Signature of Signing General Partner Detail

_____ Date