

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002873

Entity Name: GAYLON BLACK, LLC

Current Principal Place of Business:

138 SPRING VALLEY LOOP
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

P.O. BOX 161547
ALTAMONTE SPRINGS, FL 32716 US

FEI Number: 59-3639594

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLACK, GAYLON D
138 SPRING VALLEY LOOP
ALTAMONTE SPRINGS, FL 32714 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 BLACK, GAYLON D
Address P.O. BOX 161547
City-State-Zip: ALTAMONTE SPRINGS FL 32716

Title MGR
Name BLACK, PATTI J
Address 138 SPRING VALLEY LOOP
City-State-Zip: ALTAMONTE SPRINGS FL 32714

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: GAYLON BLACK

MANAGING MEMBER

02/28/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date