

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000017850

Entity Name: SECTION 32, L.L.C.

Current Principal Place of Business:

3505 HIBISCUS DRIVE
FORT MYERS, FL 33901

Current Mailing Address:

3505 HIBISCUS DRIVE
FORT MYERS, FL 33901 US

FEI Number: 65-1115753

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FALLACARA, BARBARA L
3505 HIBISCUS DRIVE
FORT MYERS, FL 33901 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 | MGR | Title | MGR |
| Name | CLEMONS, NORMAN F | Name | FALLACARA, BARBARA L |
| Address | 3505 HIBISCUS DRIVE | Address | 3505 HIBISCUS DRIVE |
| City-State-Zip: | FORT MYERS FL 33901 | City-State-Zip: | FORT MYERS FL 33901 |

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: NORMAN F CLEMONS

MANAGER

04/24/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date