

**2018 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L02000013592

**Entity Name:** FLEXSCAPE, L.L.C.

**Current Principal Place of Business:**

102 VAUGHAN ST.  
PORTLAND, ME 04102

**Current Mailing Address:**

102 VAUGHAN ST.  
PORTLAND, ME 04102 US

**FEI Number:** 01-0735532

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
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	MGR	Title	MGRM
Name	HEINZE, TORSTEN	Name	COTTON, KEVIN
Address	102 VAUGHAN ST.	Address	3615 WILD CHERRY WAY
City-State-Zip:	PORTLAND ME 04102	City-State-Zip:	MASON OH 45040

*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:** TORSTEN HEINZE

**MANAGER**

**01/11/2018**

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

\_\_\_\_\_  
Date