

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000014200

**Entity Name:** SIXOFIVE, LLC

**Current Principal Place of Business:**

7120 HAYVENHURST AVENUE  
SUITE 104  
VAN NUYS, CA 91406

**Current Mailing Address:**

C/O LA GRANGE MANAGEMENT  
7120 HAYVENHURST AVE SUITE 104  
VAN NUYS, CA 91406 US

**FEI Number:** 16-1665574

**Certificate of Status Desired:** No

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

MOORE, CHARLETTE CPA  
2627 MITCHAM DR  
TALLAHASSEE, FL 32308 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:** CHARLETTE MOORE

01/06/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name CARD, JIM  
Address 10722 DEEP BROOK DRIVE  
City-State-Zip: RIVERVIEW FL 33569  
  
Title AUTHORIZED REPRESENTATIVE  
Name LUBINSKI, NANCY  
Address C/O LA GRANGE MANAGEMENT  
7120 HAYVENHURST AVE SUITE 104  
City-State-Zip: VAN NUYS CA 91406

Title MGR  
Name LITTLE DOG MANAGEMENT CORP  
Address C/O LA GRANGE MANAGEMENT  
7120 HAYVENHURST AVE SUITE 104  
City-State-Zip: VAN NUYS CA 91406

*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:** NANCY LUBINSKI

**AUTHORIZED  
REPRESENTATIVE**

01/06/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date