

2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000012589

Entity Name: 9118 EHREN CUTOFF LLC

Current Principal Place of Business:

6601 MAGNOLIA POINT DRIVE
LAND O LAKES, FL 34637

Current Mailing Address:

6601 MAGNOLIA POINT DRIVE
LAND O LAKES, FL 34637 US

FEI Number: 90-0263048

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BELL, BRIAN E
6601 MAGNOLIA POINT DRIVE
LAND O LAKES, FL 34637 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
Name BELL, BRIAN
Address 6601 MAGNOLIA POINT DRIVE
City-State-Zip: LAND O LAKES FL 34637

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: BRIAN BELL

MANAGER

10/20/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date