

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000040292

**Entity Name:** DUO FRATELLOS, L.L.C.

**Current Principal Place of Business:**

1270 BAYSHORE DRIVE  
ENGLEWOOD, FL 34223

**Current Mailing Address:**

P. O. BOX 475  
LOCKEFORD, CA 95237 US

**FEI Number:** 20-2743890

**Certificate of Status Desired:** No

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

DICKINSON, ROBERT A  
460 S. INDIANA AVENUE  
ENGLEWOOD, FL 34223 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	BARBERO, MARTIN R	Name	BARBERO, THOMAS B
Address	1270 BAYSHORE DRIVE	Address	BOX 475
City-State-Zip:	ENGLEWOOD FL 34223	City-State-Zip:	LOCKFORD CA 95237

*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:** THOMAS B BARBERO

MANAGER

04/20/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date