

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000045376

**Entity Name:** FLORIAN FORM FUNCTION LLC

**Current Principal Place of Business:**

7827 HARDENTON ST  
WINDERMERE, FL 34786

**Current Mailing Address:**

7827 HARDENTON ST  
WINDERMERE, FL 34786 US

**FEI Number:** 20-2800027

**Certificate of Status Desired:** Yes

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

HUTTTL, FLORIAN  
7827 HARDENTON ST  
WINDERMERE, FL 34786 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 HUTTL, FLORIAN  
Address 7827 HARDENTON ST  
City-State-Zip: WINDERMERE FL 34786

Title MGRM  
Name HUTTL, JENNY C  
Address 7827 HARDENTON ST  
City-State-Zip: WINDERMERE FL 34786

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JENNY HUTTL

MGRM

01/24/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date