

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000050970

**Entity Name:** LIPAT, LLC

**Current Principal Place of Business:**

3616 HOODS HILL ROAD  
NASHVILLE, TN 37215

**Current Mailing Address:**

3616 HOODS HILL ROAD  
NASHVILLE, TN 37215

**FEI Number:** 20-2885892

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 MR  
Name PATTERSON, THOMPSON BMGR  
Address 3616 HOODS HILL ROAD  
City-State-Zip: NASHVILLE TN 37215

Title MR  
Name LIPMAN, LAWRENCE MMGRM  
Address 3616 HOODS HILL ROAD  
City-State-Zip: NASHVILLE TN 37215

*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:** THOMPSON PATTERSON

**MGR**

**04/30/2015**

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

\_\_\_\_\_  
Date