## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000066575

Entity Name: RATH TWO, LLC

**Current Principal Place of Business:** 

5405 CYPRESS CENTER DRIVE SUITE 320

TAMPA, FL 33609

**Current Mailing Address:** 

5405 CYPRESS CENTER DRIVE SUITE 320

TAMPA, FL 33609 US

FEI Number: 20-3873411 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLCOMB, VICTOR W 3203 W CYPRESS STREET TAMPA, FL 33607 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

Authorized Person(s) Detail:

Title **MANAGER** Title **MEMBER** 

RATH, FRED H Name Name FRED H RATH II, IRREVOCABLE

**TRUST** 3405 CYPRESS CENTER DR, STE 320

Address 5405 CYPRESS CENTER DRIVE Address

SUITE 320 TAMPA FL 33609

City-State-Zip: City-State-Zip: TAMPA FL 33609

Title **MEMBER** 

Name TIFFANY JOAN BLUNN,

IRREVOCABLE TRUST

Address 5405 CYPRESS CENTER DRIVE

SUITE 320

City-State-Zip: TAMPA FL 33609

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.

03/14/2014 **PRESIDENT** SIGNATURE: FRED H RATH

Date

**FILED** Mar 14, 2014

**Secretary of State** 

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