DOCUMENT# L05000067624	
Entity Name: FAUSSE RIVIERE, LLC	

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## **Current Principal Place of Business:**

909 CORDOVA DRIVE ORLANDO, FL 32804

## **Current Mailing Address:**

909 CORDOVA DRIVE ORLANDO, FL 32804

## FEI Number: 20-3116114

## Name and Address of Current Registered Agent:

ZINK, WILLIAM P MD 909 CORDOVA DRIVE ORLANDO, FL 32804 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	E: WILLIAM P ZINK MD			04/05/2017
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	ZINK, WILLIAM P MD	Name	ZINK, JOAN L	
Address	909 CORDOVA DRIVE	Address	909 CORDOVA DRIVE	
City-State-Zip:	ORLANDO FL 32804	City-State-Zip:	ORLANDO FL 32804	

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: ZINK, WILLIAM P, MD

MGR

04/05/2017 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 05, 2017 Secretary of State CC4243919246

Certificate of Status Desired: No