

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000116917

**Entity Name:** V.I.F. OF U.S.A. LLC

**Current Principal Place of Business:**

901 WESTWINDS BLVD  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

901 WESTWINDS BLVD  
TARPON SPRINGS, FL 34689 US

**FEI Number:** 20-4052278

**Certificate of Status Desired:** No

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

INGE, BOULOGNE A  
901 WESTWINDS BLVD  
TARPON SPRINGS, FL 34689 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:** INGE BOULOGNE

03/02/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name BOULOGNE, LOUIS VIDIAN  
Address 901 WESTWINDS BLVD  
City-State-Zip: TARPON SPRINGS FL 34689

Title MGRM  
Name BOULOGNE, INGE ANNA  
Address 901 WESTWINDS BLVD  
City-State-Zip: TARPON SPRINGS FL 34689

Title MGRM  
Name BOULOGNE-AYERS, FIONA  
Address 901 WESTWINDS BLVD  
City-State-Zip: TARPON SPRINGS FL 34689

*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:** INGE ANNA BOULOGNE

MGRM

03/02/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date