

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000033263

Entity Name: SKS COVE, LLC

Current Principal Place of Business:

357 SEVERIN RD
PORT CHARLOTTE, FL 33952

Current Mailing Address:

P O BOX 495023
PORT CHARLOTTE, FL 33949

FEI Number: 20-4763493

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SESHADRI, SASH S
357 SEVERIN RD
PORT CHARLOTTE, FL 33952 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 | Title | MGRM |
| Name | SESHADRI, SASH S | Name | SESHADRI, KALA |
| Address | 357 SEVERIN RD | Address | 357 SEVERIN RD |
| City-State-Zip: | PORT CHARLOTTE FL 33952 | City-State-Zip: | PORT CHARLOTTE FL 33952 |

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: SASH S SESHADRI

MGR

02/23/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date