## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000085935

Entity Name: 440 & 442 WEST BROOME, LLC

**Current Principal Place of Business:** 

17531 CR 455

MONTVERDE, FL 34756

**Current Mailing Address:** 

P.O. BOX 560012

MONTVERDE. FL 34756-0012

FEI Number: 20-5512318 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASMA, WILLIAM N 884 S. DILLARD STREET WINTER GARDEN, FL 34787 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

FILED Mar 26, 2016

**Secretary of State** 

CC3816013222

## Authorized Person(s) Detail:

Title MGR

Name ARELLANO, JOHN Address P.O. BOX 560012

City-State-Zip: MONTVERDE FL 34756

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: JOHN ARELLANO

Electronic Signature of Signing Authorized Person(s) Detail

**MANAGER** 

03/26/2016