

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099060

Entity Name: 436, LLC

Current Principal Place of Business:

180 S WINTER PARK DR
CASSELBERRY, FL 32707

Current Mailing Address:

180 S WINTER PARK DR
CASSELBERRY, FL 32707 US

FEI Number: 20-5704915

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FIALA, PATRICIA
180 S WINTER PARK DR
CASSELBERRY, FL 32707 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
Name FIALA, PATRICIA A
Address 180 S WINTER PARK DR
City-State-Zip: CASSELBERRY FL 32707

Title MGR
Name FIALA, JOSEF
Address 180 S WINTER PARK DR
City-State-Zip: CASSELBERRY FL 32707

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: PATRICIA A. FIALA

MANAGER

01/24/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date