

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000108064

**FILED**  
**Apr 09, 2017**  
**Secretary of State**  
**CC7512693097**

**Entity Name:** CHRISOULA'S CHEESECAKE SHOPPE, LLC

**Current Principal Place of Business:**

236 W GARDEN ST  
2A  
PENSACOLA, FL 32502

**Current Mailing Address:**

PO BOX 10241  
PENSACOLA, FL 32524 US

**FEI Number:** 20-5846929

**Certificate of Status Desired:** No

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

HULION, CHRISOULA A  
5123 YESTEROAKS PLACE  
PENSACOLA, FL 32504 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	MANAGER	Title	MANAGER, GENERAL
Name	CHRISOULA, HULION A	Name	HULION, TONY R
Address	5123 YESTEROAKS PLACE	Address	5123 YESTEROAKS PLACE
City-State-Zip:	PENSACOLA FL 32504	City-State-Zip:	PENSACOLA FL 32504

*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:** CHRISOULA HULION

**MANAGER**

**04/09/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date