

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000112008

Entity Name: F.N., LLC

Current Principal Place of Business:

4457 NW 93 DORAL CT.
MIAMI, FL 33178

Current Mailing Address:

4457 NW 93 DORAL CT.
MIAMI, FL 33178

FEI Number: 20-8067393

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERNANDEZ, ALFONSO
4457 NW 93 DORAL CT.
MIAMI, FL 33178 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 MGRM
Name FERNANDEZ, ALFONSO
Address 4457 NW 93 DORAL CT.
City-State-Zip: MIAMI FL 33178

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: ALFONSO FERNANDEZ

OWNER

06/12/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date