

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000010577

Entity Name: CINQUE FIGLIE, LLC**Current Principal Place of Business:**712 OCEAN DUNES CIRCLE
JUPITER, FL 33477**Current Mailing Address:**712 OCEAN DUNES CIRCLE
JUPITER, FL 33477**FEI Number:** 80-0154534**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KEEFER, JODI
712 OCEAN DUNES CIRCLE
JUPITER, FL 33477 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	GENTILE, LESLIE
Address	54 LAKEVIEW AVE
City-State-Zip:	FLORHAM PARK NJ 07932

Title	MGRM
Name	CUNNIGHAM, DONNA
Address	4 SUTTON PL
City-State-Zip:	FLORHAM PARK NJ 07932

Title	MGRM
Name	BOWDEN, PATRICIA
Address	22 KENNEDTH CT
City-State-Zip:	FLORHAM PARK NJ 07932

Title	MGRM
Name	KEEFER, JUDI
Address	712 OCEAN DUNES CIR
City-State-Zip:	JUPITER FL 33477

Title	MGRM
Name	DESANTIS, MELANIE
Address	1 WITHERSPOON CT
City-State-Zip:	MORRISTOWN NJ 07960

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: LESLIE GENTILE

MANAGER

04/07/2017

Electronic Signature of Signing Authorized Person(s) Detail_____
Date