

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000031291

**Entity Name:** LEXCHANCE, LLC

**Current Principal Place of Business:**

101 EAST BLUE HERON BLVD  
SUITE 202  
RIVIERA BEACH, FL 33404

**Current Mailing Address:**

101 EAST BLUE HERON BLVD  
SUITE 202  
RIVIERA BEACH, FL 33404 US

**FEI Number:** 75-3236898

**Certificate of Status Desired:** No

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

SAFFOLD, EZRA GII  
101 EAST BLUE HERON BLVD  
SUITE 202  
RIVIERA BEACH, FL 33404 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 SAFFOLD, EZRA G  
Address 101 E BLUE HERON BLVD  
SUITE 202  
City-State-Zip: RIVIERA BEACH FL 33404

*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:** EZRA SAFFOLD

MGRM

04/17/2015

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

\_\_\_\_\_ Date