

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000049533

Entity Name: EPI-WILDFLOWER, LLC

Current Principal Place of Business:

359 CAROLINA AVENUE
SUITE #200
WINTER PARK, FL 32789

Current Mailing Address:

359 CAROLINA AVENUE
SUITE #200
WINTER PARK, FL 32789 US

FEI Number: 26-0145333

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOWNING, GRANT T
222 WEST COMSTOCK AVENUE
SUITE 101
WINTER PARK, FL 32789 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 PUGH, JAMES HJR
Address 359 CAROLINA AVENUE, SUITE #200
City-State-Zip: WINTER PARK FL 32789

Title MGRM
Name SAND, MEREDITH
Address 359 CAROLINA AVE, SUITE #200
City-State-Zip: WINTER PARK FL 32789

Title AUTHORIZED REPRESENTATIVE
Name SAND, JUSTIN
Address 359 CAROLINA AVENUE
SUITE #200
City-State-Zip: WINTER PARK FL 32789

Title AUTHORIZED REPRESENTATIVE
Name DAVIS, MCCARLEY
Address 359 CAROLINA AVENUE
SUITE #200
City-State-Zip: WINTER PARK FL 32789

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: JUSTIN SAND

AMBR

04/27/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date