

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000021123

Entity Name: STRAWNART LLC

Current Principal Place of Business:

8490 NE 60TH ST.
HIGH SPRINGS, FL 32643

Current Mailing Address:

P O BOX 2047
HIGH SPRINGS, FL 32655

FEI Number: 80-0162214

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STRAWN, MARTHA A
8490 NE 60TH ST
HIGH SPRINGS, FL 32655 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: MARTHA A. STRAWN

02/23/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name STRAWN, MARTHA A
Address P. O. BOX 2047
City-State-Zip: HIGH SPRINGS FL 32655

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: MARTHA A. STRAWN

MGRM

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date