## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000081856

Entity Name: ASTRID MORALES, LLC

**Current Principal Place of Business:** 

23146 WESTCHESTER BLVD PUNTA GORDA, FL 33980

**Current Mailing Address:** 

P.O BOX 511243 PUNTA GORDA. FL 33951

FEI Number: 26-3244975 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MORALES, ASTRID 3106 HARBOR BLVD **UNIT 5B** PORT CHARLOTTE, FL 33952 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

**FILED** Jan 09, 2014

**Secretary of State** 

CC4970305705

## Authorized Person(s) Detail:

Title **MGRM** 

MORALES, ASTRID Name Address 3106 HARBOR BLVD

UNIT 5B

SIGNATURE: ASTRID MORALES

City-State-Zip: PORT CHARLOTTE FL 33952

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.

**MGRM** 

Electronic Signature of Signing Authorized Person(s) Detail

01/09/2014 Date