2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 22, 2015
Secretary of State
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Entity Name: ONENINE ENTERPRISES, LLC

Current Principal Place of Business:

10370 QUAIL CROWN DR
NAPLES, FL 34119

Current Mailing Address:

P.O. BOX 275
NAPLES, FL 34106 US

FEI Number: 27-0278620

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RESOP, THOMAS D
10370 QUAIL CROWN DR
NAPLES, FL 34119 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: THOMAS D. RESOP 01/22/2015

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	RESOP, KATHIE E	Name	RESOP, THOMAS D
Address	P.O. BOX 275	Address	P.O. BOX 275
City-State-Zip:	NAPLES FL 34106	City-State-Zip:	NAPLES FL 34106

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: KATHIE RESOP MGR 01/22/2015

Electronic Signature of Signing Authorized Person(s) Detail — Date