

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000060336

Entity Name: IVONNE PALACIOS LLC

Current Principal Place of Business:

527 PARTRIDGE DRIVE
KISSIMMEE, FL 34759

Current Mailing Address:

527 PARTRIDGE DRIVE
KISSIMMEE, FL 34759

FEI Number: 27-0488211

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PALACIOS, IVONNE
527 PARTRIDGE DRIVE
KISSIMMEE, FL 34759 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 MGR
Name PALACIOS, IVONNE
Address 527 PARTRIDGE DRIVE
City-State-Zip: KISSIMMEE FL 34759

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: IVONNE PALACIOS

MANAGER

05/01/2013

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date