

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000001046

Entity Name: DE CUISINE, LLC

Current Principal Place of Business:

207 N. APOPKA AVE
INVERNESS, FL 34450

Current Mailing Address:

207 N. APOPKA AVE
INVERNESS, FL 34450

FEI Number: 27-1601485

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KULOW, MICHAEL D
207 N APOPKA AVE
INVERNESS, FL 34450 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	Title	AUTHORIZED REPRESENTATIVE
Name	KULOW, MICHAEL D	Name	SMITH, ELIZABETH HOLLY
Address	P O BOX 753	Address	P O BOX 753
City-State-Zip:	ARIPEKA FL 34679	City-State-Zip:	ARIPEKA FL 34679

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: ELIZABETH HOLLY SMITH

**AUTHORIZED
REPRESENTATIVE**

02/19/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date