

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000025416

**Entity Name:** 418BAND LLC**Current Principal Place of Business:**1211 SANTIAGO DR  
JACKSONVILLE, FL 32221**Current Mailing Address:**1211 SANTIAGO DR  
JACKSONVILLE, FL 32221**FEI Number:** 34-1999934**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PHILLIPS, DESMOND  
1211 SANTIAGO DR.  
JACKSONVILLE, FL 32221 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
Name	PHILLIPS, DESMOND
Address	1211 SANTIAGO DR
City-State-Zip:	JACKSONVILLE FL 32221

Title	MGRM
Name	BROWNE, CYRIL
Address	2516 N ECTOR RD
City-State-Zip:	JACKSONVILLE FL 32211

Title	MGRM
Name	RANNIE, VICTOR
Address	7832 VIRGO ST
City-State-Zip:	JACKSONVILLE FL 32216

Title	MGRM
Name	WHITE, VEROL
Address	12174 TRIMLAWN LANE
City-State-Zip:	JACKSONVILLE FL 32225

*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:** DESMOND PHILLIPS

MR

04/29/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date