

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000034491

**Entity Name:** SEA GLASS, LLC

**Current Principal Place of Business:**

% VICTORIA L. WALLACE  
945 MELVIN ROAD  
ANNAPOLIS, MD 21403

**Current Mailing Address:**

% VICTORIA L. WALLACE  
945 MELVIN ROAD  
ANNAPOLIS, MD 21403

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 WALLACE, VICTORIA L  
Address 945 MELVIN ROAD  
City-State-Zip: ANNAPOLIS MD 21403

*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:** VICTORIA L. WALLACE

**MANAGER**

**01/15/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date