#### 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000042761

Entity Name: MY T LOVE, LLC

**FILED** Apr 15, 2016 **Secretary of State** CC7341861637

# **Current Principal Place of Business:**

4677 L.B. MCLEOD RD SUITE B

ORLANDO, FL 32811

## **Current Mailing Address:**

4677 L.B. MCLEOD RD. SUITE B ORLANDO, FL 32811 US

FEI Number: 27-2339355 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

NELSON, MICHELE D 4677 L.B. MCLEOD RD. SUITE B ORLANDO, FL 32811 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

NELSON, MICHELE D Name 4677 L.B. MCLEOD RD. Address

SUITE B

City-State-Zip: ORLANDO FL 32811

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.

04/15/2016 SIGNATURE: MICHELE NELSON **PRESIDENT**