

**2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000081043

**Entity Name:** CADDOLYST, LLC

**Current Principal Place of Business:**

5510 N HESPERIDES ST  
TAMPA, FL 33614

**Current Mailing Address:**

5510 N HESPERIDES ST  
TAMPA, FL 33614

**FEI Number:** 27-5483689

**Certificate of Status Desired:** Yes

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

ALVAREZ, RICK  
1000 W CASS STREET  
TAMPA, FL 33606 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:** RICK ALVAREZ

10/17/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name ECKARDT-GESKE, SHELLY  
Address 3826 W PLATT STREET  
City-State-Zip: TAMPA FL 33606

Title MGRM  
Name CUFFE, CRAIG  
Address 18309 WAYNE ROAD  
City-State-Zip: ODESSA FL 33556

Title PS  
Name GESKE, TIMOTHY  
Address 3826 W PLATT STREET  
City-State-Zip: TAMPA FL 33606

*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:** TIMOTHY GESKE

MEMBER

10/17/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date