

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000086171

**Entity Name:** CAPIGA GROUP LLC

**Current Principal Place of Business:**

8314 GROSVENOR CT  
UNIVERSITY PARK, FL 34201

**Current Mailing Address:**

8314 GROSVENOR CT  
UNIVERSITY PARK, FL 34201 US

**FEI Number:** 27-3315544

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
SUITE A-100  
TAMPA, FL 33612 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	MGRM
Name	MANN, CAITLIN	Name	MANN, KEITH
Address	7239 MARLOW PLACE	Address	7239 MARLOW PLACE
City-State-Zip:	UNIVERSITY PARK FL 34201	City-State-Zip:	UNIVERSITY PARK FL 34201

*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:** KEITH MANN

**MANAGER**

**01/31/2015**

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

\_\_\_\_\_  
Date