

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000110655

Entity Name: FLOMOTION, LLC**Current Principal Place of Business:**2447 3RD STREET SOUTH
JACKSONVILLE BEACH, FL 32250**Current Mailing Address:**2447 3RD STREET SOUTH
JACKSONVILLE BEACH, FL 32250 US**FEI Number:** 27-3765386**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CANTERS, CAMIEL M
201 CRANES LAKE DR
PONTE VEDRA BEACH, FL 32082 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:** CAMIEL M CANTERS

04/06/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	OWNR
Name	KINBERGER, SEAN R
Address	2967 SHORE DRIVE
City-State-Zip:	SAFETY HARBOR FL 34695

Title	OWNR
Name	CANTERS, CAMIEL M
Address	201 CRANES LAKE DR
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	OWNR
Name	GONZALEZ, MICHAEL K
Address	15450 FM 1325 1828
City-State-Zip:	AUSTIN TX 78728

Title	OWNR
Name	TULLY, TIMOTHY J
Address	639 MIDDLEBURY LOOP
City-State-Zip:	NEW SMYRNA BEACH FL 32169

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: CAMIEL CANTERS

OWNER

04/06/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date