

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000117680

Entity Name: GREEN CHEM SECOND EDITION, LLC**Current Principal Place of Business:**9995 GATE PARKWAY NORTH, SUITE 400
JACKSONVILLE, FL 32246**Current Mailing Address:**9995 GATE PARKWAY NORTH, SUITE 400
JACKSONVILLE, FL 32246**FEI Number: 27-3916271****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NUNN, DANIEL BJR.,ESQ
50 NORTH LAURA STREET, SUITE 2800
JACKSONVILLE, FL 32202 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
Name FRENKEL, RAISSA M
Address 9934 CHELSEA LAKE ROAD
City-State-Zip: JACKSONVILLE FL 32246

Title MGRM
Name SISSELMAN, STEVEN M
Address 24 CEDAR SPRINGS LANE
City-State-Zip: NEEDHAM MA 02492

Title MGRM
Name KAVALIEROS, LISA M
Address 8102 SABAL OAK LANE
City-State-Zip: JACKSONVILLE FL 32256

Title MGRM
Name CHATTIN, WILLIAM E
Address 560 CLIFTON ROAD
City-State-Zip: CRESCENT CITY FL 32212

Title MGRM
Name THE DIMITRI KAVALIEROS TRUST
Address 8725 HAMPSHIRE GLEN DRIVE
City-State-Zip: JACKSONVILLE FL 32256

Title MGRM
Name THE NICK KAVALIEROS TRUST
Address 8102 SABAL OAK LANE
City-State-Zip: JACKSONVILLE FL 32256

Title MGMR
Name THE JACK KAVALIEROS TRUST
Address 9995 GATE PARKWAY NORTH, SUITE 400
City-State-Zip: JACKSONVILLE FL 32246

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: LISA KAVALIEROS**MGMR****03/09/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date