

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000118444

**Entity Name:** URBAN HOUSE LLC

**Current Principal Place of Business:**

1090 INNOVATION AVE  
SUITE 131  
NORTH PORT, FL 34289

**Current Mailing Address:**

PO BOX 7182  
NORTH PORT, FL 34290 US

**FEI Number:** 27-4012030

**Certificate of Status Desired:** No

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

BERTELSEN, DEANE EIII  
5032 TREKELL ST  
NORTH PORT, FL 34287 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 BERTELSEN, DEANE EIII  
Address 5032 TREKELL ST.  
City-State-Zip: NORTH PORT FL 34287

Title MGRM  
Name MIDDLETON, PETER K  
Address 1091 OHANA WAY  
APT 208  
City-State-Zip: NORTH PORT FL 34289

*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:** DEANE BERTELSEN

**PARTNER**

**03/10/2016**

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

\_\_\_\_\_  
Date