

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000131168

**Entity Name:** RUTH TUFARELLA, LLC

**Current Principal Place of Business:**

1319-D MAGNOLIA DR.  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

158 MARGARETS WAY  
THOMASVILLE, GA 31792

**FEI Number:** 30-0658640

**Certificate of Status Desired:** No

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

TUFARELLA, RUTH  
1319-D MAGNOLIA DR.  
TALLAHASSEE, FL 32308 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 TUFARELLA, RUTH  
Address 158 MARGARETS WAY  
City-State-Zip: THOMASVILLE GA 31792

*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:** RUTH TUFARELLA

MGRM

01/02/2014

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

\_\_\_\_\_  
Date