

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000036177

Entity Name: SAMUEL LOBELLO CARPENTRY LLC

Current Principal Place of Business:

297 W. MIRACLE STRIP PKWY.
MARY ESTHER, FL 32569

Current Mailing Address:

297 W. MIRACLE STRIP PKWY.
MARY ESTHER, FL 32569

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOBELLO, SAMUEL
297 W. MIRACLE STRIP PKWY.
MARY ESTHER, FL 32569 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 OWNE
Name LOBELLO, SAMUEL
Address 297 W MIRACLE STRIP PKWY
City-State-Zip: MARY ESTHER FL 32569

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: SAMUEL LOBELLO

MGRM

04/17/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date