

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000047127

**Entity Name:** CASA DI FIORI, LLC

**Current Principal Place of Business:**

1401 MIDDLE GULF DRIVE  
#404N  
SANIBEL, FL 33957

**Current Mailing Address:**

182 W. CENTRAL STREET  
#303  
NATICK, MA 01760 US

**FEI Number:** 45-3833759

**Certificate of Status Desired:** No

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

MOOREY, THOMAS EESQ.  
1430 ROYAL PALM SQUARE BLVD., #105  
FORT MYERS, FL 33919 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 MGR  
Name FRANCHI, PASQUALE  
Address 1401 MIDDLE GULF DR. #404N  
City-State-Zip: SANIBEL FL 33957

Title MGR  
Name FRANCHI, LOUIS S  
Address 1401 MIDDLE GULF DR. #404N  
City-State-Zip: SANIBEL FL 33957

*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:** PASQUALE FRANCHI

**MANAGER**

**02/14/2017**

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

\_\_\_\_\_  
Date