

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000073411

Entity Name: DECARLE EVENT DESIGN AND CATERING LLC

Current Principal Place of Business:

6647 COPPER RIDGE TRAIL
UNIVERSITY PARK, FL 34201

Current Mailing Address:

6647 COPPER RIDGE TRAIL
UNIVERSITY PARK, FL 34201

FEI Number: 45-2628815

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DECARLE, JENNIFER M
6647 COPPER RIDGE TRAIL
UNIVERSITY PARK, FL 34201 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 DECARLE, JENNIFER M
Address 6647 COPPER RIDGE TRAIL
City-State-Zip: UNIVERSITY PARK FL 34201

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: JENNIFER DECARLE

MANAGER

03/06/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date