

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000090958

Entity Name: LECATES, LLC

Current Principal Place of Business:

332 NW SHEFFIELD CIRCLE
PORT ST. LUCIE, FL 34983

Current Mailing Address:

332 NW SHEFFIELD CIRCLE
PORT ST. LUCIE, FL 34983 US

FEI Number: 45-2984992

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRECHBILL, MARK CPA
215 SW FEDERAL HWY
SUITE 200
STUART, FL 34994 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 LECATES, ANNE H
Address 332 NW SHEFFIELD CIRCLE
City-State-Zip: PORT ST. LUCIE FL 34983

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: ANNE H. LECATES

MANAGER

04/22/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date