

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000102055

**Entity Name:** ORLANDO OUTDOOR FURNITURE, LLC

**Current Principal Place of Business:**

762 EAST ALTAMONTE DR.  
SUITE 1000  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

762 EAST ALTAMONTE DR.  
SUITE 1000  
ALTAMONTE SPRINGS, FL 32701 US

**FEI Number:** 45-3322791

**Certificate of Status Desired:** No

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

LAIL, TINA  
1714 MARKHAM GLEN CIRCLE  
LONGWOOD, FL 32779 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           MANAGER, OWNER  
Name           CLARK, TOBY  
Address        495 N. SEMORAN BLVD.  
                  SUITE 9  
City-State-Zip: WINTER PARK FL 32792

*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:** TOBY CLARK

**OWNER**

**01/22/2016**

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

\_\_\_\_\_  
Date