#### 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: TOM LEEMAN PARTNER

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: BIRTHDAYCOMP.COM LLC

1006 CASUARINA ROAD 4 DELRAY BEACH, FL 33483

## **Current Mailing Address:**

**1006 CASUARINA ROAD** 4 DELRAY BEACH, FL 33483 US

### FEI Number: 45-3706227

### Name and Address of Current Registered Agent:

VANDERBAAN, JAN 1006 CASUARINA ROAD 4 DELRAY BEACH, FL 33483 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

Authorized Person(s) Detail :			
Title	MGRM	Title	MGRM
Name	VANDERBAAN, JAN	Name	LEEMAN, TOM
Address	11 SOUTH WEST 4TH STREET	Address	1006 CASUARINA ROAD
City-State-Zip:	DELRAY BEACH FL 33444	City-State-Zip:	4 DELRAY BEACH FL 33483

**Current Principal Place of Business:** 

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L11000119780

FILED Mar 04, 2014 Secretary of State CC5131784481

Certificate of Status Desired: No

03/04/2014

Date

Date