

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000132066

Entity Name: PINONICHOLSON, PLLC

Current Principal Place of Business:

189 S. ORANGE AVENUE, SUITE 1650
ORLANDO, FL 32801

Current Mailing Address:

PO BOX 1511
ORLANDO, FL 32802

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PINO, LAURENCE JESQ.
189 S. ORANGE AVENUE, SUITE 1650
ORLANDO, FL 32801 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 MGRM
Name PINO, LAURENCE JESQ.
Address PO BOX 1511
City-State-Zip: ORLANDO FL 32802

Title MGRM
Name NICHOLSON, MYRA ESQ.
Address PO BOX 1511
City-State-Zip: ORLANDO FL 32802

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: LAURENCE J. PINO, ESQ.

MANAGER

02/27/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date