

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000015644

**Entity Name:** METRICSLICE LLC

**Current Principal Place of Business:**

149 8TH AVENUE N  
REAR APT  
ST PETERSBURG, FL 33701

**Current Mailing Address:**

PO BOX 3711  
ST. PETERSBURG, FL 33731 US

**FEI Number:** 45-4444620

**Certificate of Status Desired:** No

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

HAMM, REBECCA J  
149 8TH AVE N  
REAR APT  
ST PETERSBURG, FL 33701 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 HAMM, REBECCA J  
Address 149 8TH AVE N  
REAR APT  
City-State-Zip: ST. PETERSBURG FL 33701

*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:** REBECCA HAMM

**MANAGER**

**03/16/2014**

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

\_\_\_\_\_  
Date