

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000023449

**FILED**  
**Jan 11, 2015**  
**Secretary of State**  
**CC1069722854**

**Entity Name:** PATRICIA PERRON LLC

**Current Principal Place of Business:**

6309 CENTER RING ROAD  
SARASOTA, FL 34243

**Current Mailing Address:**

1045 QUEEN RD  
VENICE, FL 34293 US

**FEI Number:** 45-4527903

**Certificate of Status Desired:** No

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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	Title	S
Name	PERRON, PATRICIA LYNN	Name	PERRON, PATRICIA LYNN
Address	6309 CENTER RING ROAD	Address	6309 CENTER RING ROAD
City-State-Zip:	SARASOTA FL 34243	City-State-Zip:	SARASOTA FL 34243

*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:** PATRICIA LYNN PERRON

**PRESIDENT**

**01/11/2015**

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

\_\_\_\_\_  
Date