

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000071310

**Entity Name:** SEASCAPE CERAMIC IMAGES LLC

**Current Principal Place of Business:**

2889 MCFARLAND ROAD UNI 1016  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

PO BOX 561985  
MIAMI, FL 33256

**FEI Number:** 45-5429382

**Certificate of Status Desired:** Yes

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

SPIEGEL & UTRERA PA  
1840 SOUTHWEST 22ND STREET  
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            | DRODVILLO, KENNETH J         | Name            | DRODVILLO, KENNETH J         |
| Address         | 2889 MCFARLAND ROAD UNI 1016 | Address         | 2889 MCFARLAND ROAD UNI 1016 |
| City-State-Zip: | COCONUT GROVE FL 33133       | City-State-Zip: | COCONUT GROVE FL 33133       |

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KENNETH JOHN DRODVILLO

**MANAGER**

**03/29/2013**

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

\_\_\_\_\_  
Date