

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000141862

**Entity Name:** MARCEE BROWN, LLC

**Current Principal Place of Business:**

7820 CLEMSON ST.  
201  
NAPLES, FL 34104

**Current Mailing Address:**

7820 CLEMSON ST.  
201  
NAPLES, FL 34104 US

**FEI Number:** 46-1325274

**Certificate of Status Desired:** No

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

BROWN, MARCEE D  
7820 CLEMSON ST.  
201  
NAPLES, FL 34104 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 BROWN, MARCEE D  
Address 7820 CLEMSON ST.  
201  
City-State-Zip: NAPLES FL 34104

*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:** MARCEE BROWN

MS, BCBA

01/10/2017

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

\_\_\_\_\_  
Date