

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000154288

Entity Name: TAKE THE SHOT OR NOT, LLC

Current Principal Place of Business:

12730 E. HWY 25
OCKLAWAHA, FL 32179

Current Mailing Address:

P O BOX 478
OCKLAWAHA, FL 32183

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PORTER, JACKIE
12730 E. HWY 25
OCKLAWAHA, FL 32179 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 PORTER, JACKIE
Address P O BOX 478
City-State-Zip: OCKLAWAHA FL 32183

Title MGRM
Name FINN, RAYMOND
Address P O BOX 1571
City-State-Zip: OCKLAWAHA FL 32183

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: JACKIE PORTER

MGRM

04/19/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date