

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000027208

**Entity Name:** FLORIDA 2 HOLDINGS, LLC

**Current Principal Place of Business:**

22 W. MONUMENT AVENUE  
SUITE 1  
KISSIMMEE, FL 34741

**Current Mailing Address:**

22 W. MONUMENT AVENUE  
SUITE 1  
KISSIMMEE, FL 34741

**FEI Number:** 46-4751850

**Certificate of Status Desired:** No

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

ACKLEY, RAJIA N  
22 W. MONUMENT AVENUE  
SUITE 1  
KISSIMMEE, FL 34741 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, AUTHORIZED MEMBER  
Name ACKLEY, RAJIA N  
Address 22 W. MONUMENT AVENUE, SUITE 1  
City-State-Zip: KISSIMMEE FL 34741

Title AUTHORIZED MEMBER  
Name ARNOLD, JAMES A  
Address 410 TURKEY CREEK  
City-State-Zip: ALACHUA FL 32615

Title AUTHORIZED MEMBER  
Name SMITH, KEITH T  
Address 1800 ESPANOLA DRIVE  
City-State-Zip: ORLANDO FL 32804

*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:** RAJIA ACKLEY

**MGR**

**04/20/2015**

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

\_\_\_\_\_  
Date