

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000058484

Entity Name: POWER OUT LIGHT ON, LLC

Current Principal Place of Business:

3215 W. FOUNTAIN BLVD.
TAMPA, FL 33609

Current Mailing Address:

3215 W. FOUNTAIN BLVD.
TAMPA, FL 33609

FEI Number: 46-2600550

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KALIEBE, KARL
3215 W. FOUNTAIN BLVD.
TAMPA, FL 33609 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 KALIEBE, KARL
Address 3215 W. FOUNTAIN BLVD.
City-State-Zip: TAMPA FL 33609

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: KARL KALIEBE

MGRM

05/01/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date