

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000062609

Entity Name: STRAPLESS, LLC

Current Principal Place of Business:

1505 W LE COMPTE DR
TAMPA, FL 33604

Current Mailing Address:

PO BOX 15682
TAMPA, FL 33614 US

FEI Number: 46-2687101

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANCHEZ LAW OFFICES, P.A.
201 S. WESTLAND AVE.
TAMPA, FL 33606 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 ALVAREZ, CARLOS
Address PO BOX 15682
City-State-Zip: TAMPA FL 33614

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: ALVAREZ , CARLOS

MGRM

02/01/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date