

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000073507

**FILED**  
**Apr 15, 2014**  
**Secretary of State**  
**CC3964832395**

**Entity Name:** CHAPEL OF LOVE TATTOO AND PIERCING STUDIO LLC

**Current Principal Place of Business:**

1414 HIGHLAND AVE  
MELBOURNE, FL 32935

**Current Mailing Address:**

1414 HIGHLAND AVE  
MELBOURNE, FL 32935 US

**FEI Number: 46-2804973**

**Certificate of Status Desired: Yes**

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

RIPOLL, ROBERT A  
7067 HAMMOCK LAKES DR  
MELBOURNE, FL 32940 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	Title	OWNER/ MANAGER
Name	RIPOLL, ROBERT A	Name	RIPOLL, ERIKA I
Address	7067 HAMMOCK LAKES DR	Address	7067 HAMMOCK LAKES DR
City-State-Zip:	MELBOURNE FL 32940	City-State-Zip:	MELBOURNE FL 32940

*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: ROBERT RIPOLL**

**OWNER**

**04/15/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date