# 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: KALYNN BABICZ

Electronic Signature of Signing Authorized Person(s) Detail

# 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000094226

Entity Name: BROKEN ARROW INVESTMENTS, LLC

#### **Current Principal Place of Business:**

6224 CREWS LAKE ROAD LAKELAND, FL 33813

## **Current Mailing Address:**

6224 CREWS LAKE ROAD LAKELAND. FL 33813 US

### FEI Number: 37-1736919

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

BABICZ, KALYNN B 6224 CREWS LAKE ROAD LAKELAND, FL 33813 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:	KALYNN B BABICZ		03/23/2016	
		Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :					
	Title	MGMR	Title	MGMR	
	Name	BABICZ FAMILY HOLDINGS, LLC	Name	CURLS, JOHN M	
	Address	6224 CREWS LAKE ROAD	Address	6208 ALAMANDA HILLS BLVD	
	City-State-Zip:	LAKELAND FL 33813	City-State-Zip:	LAKELAND FL 33813	

03/23/2016

REGISTERED AGENT

Date

## FILED Mar 23, 2016 Secretary of State CC9301151419

Certificate of Status Desired: No