

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000102962

**Entity Name:** PAVED 2 PERFECTION, LLC

**Current Principal Place of Business:**

138 CROWN WHEEL CIR  
SAINT JOHNS, FL 32259

**Current Mailing Address:**

PO BOX 43161  
JACKSONVILLE, FL 32203

**FEI Number:** 46-3228523

**Certificate of Status Desired:** No

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

GOGGINS, DARNELL  
138 CROWN WHEEL CIRCLE  
SAINT JOHNS, FL 32259 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  
Name GOGGINS, DARNELL  
Address 138 CROWN WHEEL CIRCLE  
City-State-Zip: JACKSONVILLE FL 32259

*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:** DARNELL GOGGINS

MANAGER

04/26/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date