2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000103245

Entity Name: EMATB, LLC

Current Principal Place of Business:

2502 W. SAINT ISABEL ST, SUITE B TAMPA, FL 33607

Current Mailing Address:

2502 W. SAINT ISABEL ST, SUITE B TAMPA, FL 33607 US

FEI Number: 45-2773050

Name and Address of Current Registered Agent:

MCCONNELL, WILLIAM E 2502 W. SAINT ISABEL ST, SUITE B TAMPA, FL 33607 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

Authorized Person(s) Detail :

Authorized Ferson(s) Detail .				
Title	MANAGER	Title	MGR	
Name	MCCONNELL, WILLIAM E	Name	PIDALA, ANTHONY I	
Address	2502 W. SAINT ISABEL ST, SUITE B	Address	2502 W. SAINT ISABEL ST, SUITE B	
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33607	
Title	MOD	T:41 e	MOD	
Title	MGR	Title	MGR	
Name	SAND, I. CHARLES	Name	ROBELLI, JAMES	
Address	2502 W. SAINT ISABEL ST, SUITE B	Address	2502 W. SAINT ISABEL ST, SUITE B	
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33607	
Title	MGR			
Name	ALEXANDER, ANDREW			
Address	2502 W. SAINT ISABEL ST, SUITE B			
City-State-Zip:	TAMPA FL 33607			

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: WILLIAM E MCCONNELL

MANAGER

03/07/2016 Date

Date

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No