

2014 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L13000129512

Entity Name: FLYERWORKS, LLC

Current Principal Place of Business:

1635 SHEPHERDS GLADE DR.
APEX, NC 27523

Current Mailing Address:

PO BOX 67328
ST. PETE BEACH, FL 33736

FEI Number: 46-3692430

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORRIS, KATHLEEN
22554 CLIFFSIDE WAY
LAND O LAKES, FL 34639 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 MORRIS, KATHLEEN
Address 22554 CLIFFSIDE WAY
City-State-Zip: LAND O LAKES FL 34639

Title MGR
Name MATLOCK, ANDREW
Address PO BOX 67328
City-State-Zip: ST PETE BEACH FL 33736

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: ANDREW MATLOCK

MANAGER

07/18/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date