## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000025152

Entity Name: SHAWN M MARIN LLC

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**Current Principal Place of Business:** 

36 ALDER AVE SE 5

FORT WALTON BEACH, FL 32548

**Current Mailing Address:** 

36 ALDER AVE SE

5

FORT WALTON BEACH, FL 32548 US

FEI Number: 46-4804079 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARIN, SHAWN M 36 ALDER AVE SE #5

FORT WALTON BEACH, FL 32548 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

FILED Mar 30, 2016

**Secretary of State** 

CC4351657165

Authorized Person(s) Detail:

Title MGR Title MGR

Name MARIN, SHAWN M Name MARIN, ROBERTO

Address 542 NELSON POINT ROAD Address 542 NELSON POINT ROAD

City-State-Zip: NICEVILLE FL 32578 City-State-Zip: NICEVILLE FL 32578

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: SHAWN MARIN 03/30/2016