

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000040241

Entity Name: SHREE MAA MAHALAXMI, LLC**Current Principal Place of Business:**9542 SHEPARD PL
WELLINGTON, FL 33414**Current Mailing Address:**9542 SHEPARD PL
WELLINGTON, FL 33414 US**FEI Number:** 46-5030360**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VIROJA, JAGMOHAN
9542 SHEPARD PL
WELLINGTON, FL 33414 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	VIROJA, JAGMOHAN
Address	9542 SHEPARD PL
City-State-Zip:	WELLINGTON FL 33414

Title	AMBR
Name	PATEL, AMIT
Address	11205 MARINA BAY ROAD
City-State-Zip:	WELLINGTON FL 33414

Title	AMBR
Name	PATEL, ANAND
Address	642 RIVIERA DRIVE
City-State-Zip:	BOYNTON BEACH FL 33435

Title	AMBR
Name	MATALIA, HITESH
Address	2631 DANFORTH TERRACE
City-State-Zip:	WELLINGTON FL 33414

Title	AMBR
Name	PATEL, VIJAY
Address	11186 MARITIME CT
City-State-Zip:	WELLINGTON FL 33449

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: JAGMOHAN VIROJA

MGR

04/25/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date