

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000048536

**FILED**  
**Feb 17, 2015**  
**Secretary of State**  
**CC2785201266**

**Entity Name:** FLATS ADDICT OUTFITTERS LLC

**Current Principal Place of Business:**

3841 PALM BEACH BLVD  
FORT MYERS, FL 33916

**Current Mailing Address:**

3841 PALM BEACH BLVD  
FORT MYERS, FL 33916 US

**FEI Number:** 46-5200675

**Certificate of Status Desired:** No

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

HOOD, DYLAN J  
1005 NW 15TH TERRACE  
CAPE CORAL, FL 33993 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 HOOD, DYLAN J  
Address 1005 NW 15TH TERRACE  
City-State-Zip: CAPE CORAL FL 33993

Title MGR  
Name HABERLE, AUSTIN M  
Address 17101 PLEASURE ROAD  
City-State-Zip: CAPE CORAL FL 33909

Title MGR  
Name MARCINEK, TYLER L  
Address 11654 ROYAL TEE CIRCLE  
City-State-Zip: CAPE CORAL FL 33991

*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:** DYLAN HOOD

**MANAGER**

**02/17/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date