

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000059560

**Entity Name:** PNS OF FLORIDA I LLC

**Current Principal Place of Business:**

8323 NW 12TH STREET  
SUITE 115  
MIAMI, FL 33126

**Current Mailing Address:**

8323 NW 12TH STREET  
SUITE 115  
MIAMI, FL 33126

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

DOMINGUEZ, JENNY  
8323 NW 12TH STREET  
115  
MIAMI, FL 33126 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 JOHNSON, RON  
Address 8323 NW 12TH STREET SUITE 115  
City-State-Zip: MIAMI FL 33126

*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:** RON JOHNSON

MGR

04/28/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date