

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000102702

Entity Name: CCCLX CONSULTING, LLC

Current Principal Place of Business:

6796 TRAIL RIDGE DRIVE
LAKELAND, FL 33813

Current Mailing Address:

6796 TRAIL RIDGE DRIVE
LAKELAND, FL 33813 US

FEI Number: 47-1202568

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HALLOCK, DAVID D. JR.
ONE LAKE MORTON DRIVE
LAKELAND, FL 33801 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 MGMR
Name WILSON, PAUL T
Address 6796 TRAIL RIDGE DRIVE
City-State-Zip: LAKELAND FL 33813

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: PAUL T. WILSON

MANAGER

02/09/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date