

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000106118

**Entity Name:** SPIN CAPITAL, LLC

**Current Principal Place of Business:**

17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

PO BOX 1601  
GULF BREEZE, FL 32562 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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:** WINSTON T. BOUK

01/08/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name BOUK, WINSTON  
Address PO BOX 1601  
City-State-Zip: GULF BREEZE FL 32562

*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:** WINSTON BOUK

AMBR

01/08/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date