

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000110509

**Entity Name:** LEWIS 4111, LLC

**Current Principal Place of Business:**

245 LANE AVENUE NORTH  
JACKSONVILLE, FL 32254

**Current Mailing Address:**

245 LANE AVENUE NORTH  
JACKSONVILLE, FL 32254

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

APOL, PETER  
245 LANE AVENUE NORTH  
JACKSONVILLE, FL 32254 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 MY ASSETS HOLDING, LLC  
Address 245 LANE AVENUE NORTH  
City-State-Zip: JACKSONVILLE FL 32254

*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:** PETER APOL

MGR

04/28/2016

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

\_\_\_\_\_ Date