

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000026828

Entity Name: BLEED TRINITY LLC

Current Principal Place of Business:

1700 LINTON LAKE DRIVE
APARTMENT A
DELRAY BEACH, FL 33445

Current Mailing Address:

1700 LINTON LAKE DRIVE
APARTMENT A
DELRAY BEACH, FL 33445

FEI Number: 47-3129138

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 AMBR
Name BROST, KIRK
Address 1700 LINTON LAKE DRIVE,
 APARTMENT A
City-State-Zip: DELRAY BEACH FL 33445

Title AMBR
Name BROST, ANDREW
Address 1700 LINTON LAKE DRIVE,
 APARTMENT A
City-State-Zip: DELRAY BEACH FL 33445

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: KIRK BROST

MEMBER

04/14/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date