

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000172901

Entity Name: FALCON UNLIMITED, LLC**Current Principal Place of Business:**893 E PALMETTO PARK ROAD
BOCA RATON, FL 33432**Current Mailing Address:**7224 BRUNSWICK CIRCLE
BOYNTON BEACH, FL 33472 US**FEI Number:** 47-5266573**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BINCE, STACEY
7224 BRUNSWICK CIRCLE
BOYNTON BEACH, FL 33472 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 | BINCE, STACEY |
| Address | 7224 BRUNSWICK CIRCLE |
| City-State-Zip: | BOYNTON BEACH FL 33472 |

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|-----------------|------------------------|
| Title | MGR |
| Name | BINCE, STACEY |
| Address | 7224 BRUNSWICK CIRCLE |
| City-State-Zip: | BOYNTON BEACH FL 33472 |

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|-----------------|------------------------|
| Title | AMBR |
| Name | KIRK, ADAM |
| Address | 7224 BRUNSWICK CIRCLE |
| City-State-Zip: | BOYNTON BEACH FL 33472 |

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|-----------------|------------------------|
| Title | MGR |
| Name | KIRK, ADAM |
| Address | 7224 BRUNSWICK CIRCLE |
| City-State-Zip: | BOYNTON BEACH FL 33472 |

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: STACEY BINCE

AMBR

04/07/2017

Electronic Signature of Signing Authorized Person(s) Detail_____
Date