

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000175439

**FILED**  
**Feb 05, 2016**  
**Secretary of State**  
**CC9990695375**

**Entity Name:** 5960 STAR GRASS LLC

**Current Principal Place of Business:**

5911 STAR GRASS LN  
NAPLES, FL 34116

**Current Mailing Address:**

5911 STAR GRASS LN  
NAPLES, FL 34116

**FEI Number:** 47-5315894

**Certificate of Status Desired:** No

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

MARIN, DIANA R  
5911 STAR GRASS LN  
NAPLES, FL 34116 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	Title	MGR, AUTHORIZED MEMBER
Name	MARIN, DIANA R	Name	UNIQUE QUALITY LLC
Address	5911 STAR GRASS LN	Address	5911 STAR GRASS LN
City-State-Zip:	NAPLES FL 34116	City-State-Zip:	NAPLES FL 34116

Title AUTHORIZED MEMBER  
Name STEY DREAMS INVESTMENTS LLC  
Address 5911 STAR GRASS LN  
City-State-Zip: NAPLES FL 34116

*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:** DIANA R MARIN

**MANAGER**

**02/05/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date