

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000185954

**Entity Name:** ELIZABETH LACOUTURE LAYTON, PLLC

**Current Principal Place of Business:**

13971 SOUND OVERLOOK DRIVE SOUTH  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

13971 SOUND OVERLOOK DRIVE SOUTH  
JACKSONVILLE, FL 32224 US

**FEI Number:** 47-5504157

**Certificate of Status Desired:** Yes

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

LAYTON, ELIZABETH  
13971 SOUND OVERLOOK DRIVE SOUTH  
JACKSONVILLE, FL 32224 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            LAYTON, ELIZABETH L  
Address        13971 SOUND OVERLOOK DRIVE  
                  SOUTH  
City-State-Zip: JACKSONVILLE FL 32224

*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:** ELIZABETH LACOUTURE LAYTON

**MRS**

**04/29/2016**

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

\_\_\_\_\_  
Date