

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000201480

**Entity Name:** ILLUMITIZE LLC

**Current Principal Place of Business:**

4273 14TH ST NE  
NAPLES, FL 34120

**Current Mailing Address:**

4273 14TH ST NE  
NAPLES, FL 34120 US

**FEI Number:** 61-1807079

**Certificate of Status Desired:** No

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

VILLARRAGA, DIXIBETH H  
628 SW 11 TERR  
CAPE CORAL, FL 33991 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:** DIXIBETH H VILLARRAGA

09/21/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AR  
Name FLECK, DAVID  
Address 628 SW 11 TERR  
City-State-Zip: CAPE CORAL FL 33991

Title AR  
Name SUNDERMEIER, ALLISON  
Address 732 SW SUN CIRCLE  
City-State-Zip: PALM CITY FL 34990

Title AR  
Name BRADLEY, BRIAN  
Address 118 SW 49 TERRACE  
City-State-Zip: CAPE CORAL FL 33914

Title AR  
Name MUKUVI, JOSEPH  
Address 17200 WOODBINE WAY  
City-State-Zip: FORT MYERS FL 33967

Title AR  
Name VILLARRAGA, DIXIBETH  
Address 4273 14TH STREET NE  
City-State-Zip: NAPLES FL 34120

Title AUTHORIZED REPRESENTATIVE  
Name VISION QUEST HOLDINGS, LLC  
Address PO BOX 61768  
City-State-Zip: FORT MYERS FL 33906-1768

*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:** DIXIBETH H. VILLARRAGA

FOUNDER

09/21/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date