

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000037643

**Entity Name:** GRADE ENTERPRISE L.L.C.

**Current Principal Place of Business:**

301 DOGFISH CT  
KISSIMMEE, FL 34759

**Current Mailing Address:**

PO BOX 581582  
KISSIMMEE, FL 34758 US

**FEI Number: 81-1581890**

**Certificate of Status Desired: Yes**

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

SANDERS, LYRIC  
8802 N DELMONTE ST  
KISSIMMEE, FL 34741 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	MGRM	Title	MGRM
Name	CONEY, BOBBY L	Name	CONEY, CHALETTE L
Address	301 DOGFISH CT	Address	301 DOGFISH CT
City-State-Zip:	KISSIMMEE FL 34759	City-State-Zip:	KISSIMMEE FL 34759

*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: CHALETTE CONEY**

**MGRM**

**04/21/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date