

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000076856

Entity Name: IRIS LLC

Current Principal Place of Business:

516 CASCADE FALLS DR.
WESTON, FL 33327

Current Mailing Address:

516 CASCADE FALLS DR.
WESTON, FL 33327

FEI Number: 82-1346704

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORO VILLAGRA, NICOLAS S
516 CASCADE FALLS DR.
WESTON, FL 33327 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 GNECCO, CELINA M
Address 516 CASCADE FALLS DR.
City-State-Zip: WESTON FL 33327

Title MGR
Name NORO VILLAGRA, NICOLAS S
Address 516 CASCADE FALLS DR.
City-State-Zip: WESTON FL 33327

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: NICOLAS NORO VILLAGRA

REGISTERED AGENT

01/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date