

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000097996

**Entity Name:** OPTIMAL LLC

**Current Principal Place of Business:**

3401 N 49TH STREET  
TAMPA, FL 33605

**Current Mailing Address:**

3401 N 49TH STREET  
TAMPA, FL 33605 US

**FEI Number:** 81-2727832

**Certificate of Status Desired:** No

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

CELESTIN, ALBERTA LYDIA  
3401 N 49TH STREET  
TAMPA, FL 33605 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:** ALBERTA LYDIA CELESTIN

04/28/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           CELESTIN, ALBERTA LYDIA  
Address        3401 N 49TH STREET  
City-State-Zip: TAMPA FL 33605

*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:** ALBERTA LYDIA CELESTIN

MANAGER

04/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date