#### 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000098959

Entity Name: DEPARTMENT OF VISUAL CONSCIOUSNESS, LLC

FILED
Apr 06, 2017
Secretary of State
CC7134377463

### **Current Principal Place of Business:**

761 LA FIESTA DR. DAVENPORT, FL 33837

# **Current Mailing Address:**

761 LA FIESTA DR. DAVENPORT, FL 33837

FEI Number: 81-2745317 Certificate of Status Desired: No

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

REGISTERED AGENTS INC. 3030 N. ROCKY POINT DR. STE 150A TAMPA, FL 33607 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 MGR

Name WILLIAM, POTVIN
Address 761 LA FIESTA DR.

City-State-Zip: DAVENPORT FL 33837

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: WILLIAM POTVIN MGR