

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000062127

**Entity Name:** 38 RAINTREE, LLC

**Current Principal Place of Business:**

165 RAE DRIVE  
PALM COAST, FL 32164

**Current Mailing Address:**

165 RAE DRIVE  
PALM COAST, FL 32164

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CHIUMENTO SELIS DWYER, PL  
145 CITY PLACE  
SUITE 301  
PALM COAST, FL 32164 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 FINCK, HANNELE  
Address 165 RAE DRIVE  
City-State-Zip: PALM COAST FL 32164

Title AMBR  
Name FINCK, CAROL  
Address 131-27 234 STREET  
City-State-Zip: LAURELTON NY 11422

Title AMBR  
Name FINCK, ELISABETH  
Address 45 LINDA STREET  
City-State-Zip: PORT JEFFERSON STATION NY 11776

*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:** HANNELE G.F.FINCK

MS

03/29/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date