

**2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M0200000620

**Entity Name:** PURCHASING POWER PLUS, LLC

**Current Principal Place of Business:**

843 WOOD BRIAR LOOP  
SANFORD, FL 32771

**Current Mailing Address:**

5224 WEST STATE RD. 46 #337  
SANFORD, FL 32771

**FEI Number:** 34-1846542

**Certificate of Status Desired:** No

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

PUCKETT, BETTY  
843 WOODBRIAR LOOP  
SANFORD, FL 32771 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            | PUCKETT, BETTY     | Name            | PUCKETT, GARY      |
| Address         | 843 WOODBRIAR LOOP | Address         | 843 WOODBRIAR LOOP |
| City-State-Zip: | SANFORD FL 32771   | City-State-Zip: | SANFORD FL 32771   |

*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:** BETTY PUCKETT

**OWNER**

**02/17/2015**

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

\_\_\_\_\_ Date