

**2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M12000000567

**Entity Name:** IRIE-MON, LLC

**Current Principal Place of Business:**

135 JENKINS STREET,  
SUITE 105B-320  
ST. AUGUSTINE, FL 32086

**Current Mailing Address:**

135 JENKINS STREET,  
SUITE 105B-320  
ST. AUGUSTINE, FL 32086 US

**FEI Number:** 45-4264169

**Certificate of Status Desired:** No

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

CAMP, RICHARD  
6817 SOUTHPOINT PARKWAY #2201  
JACKSONVILLE, FL 32216 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 SPETH, AMELIA  
Address 14286-19 BEACH BLVD., SUITE 126  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title MGR  
Name SPETH, WARREN N  
Address PO BOX 4950  
City-State-Zip: ALEXANDRIA VA 22303

Title MGR  
Name SPETH, CHELSEA A  
Address 1726 34TH ST. NW  
City-State-Zip: WASHINGTON DC 20007

*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:** AMELIA SPETH

**MANAGER**

**01/21/2014**

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

\_\_\_\_\_  
Date