

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000001953

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** THE TECH TEAM.AERO, LLC

**Current Principal Place of Business:**

2121 PONCE DE LEON BLVD  
SUITE 530  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2121 PONCE DE LEON BLVD  
SUITE 530  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 80-0310872      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

CASTRO, BRENDA  
2121 PONCE DE LEON BLVD  
SUITE 530  
CORAL GABLES, FL 33134 US

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

FURLAN, CHRISTOPHER  
2121 PONCE DE LEON BLVD  
SUITE 530  
CORAL GABLES, FL 33134 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: CHRISTOPHER FURLAN

01/05/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CAUFF, JONATHAN  
Address: 2121 DE LEON BLVD, SUITE 530  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM  
Name: AYALA, LUIS  
Address: 2121 PONCE DE LEON BLVD, SUITE 530  
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JONATHAN CAUFF

MGRM

01/05/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date