

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000089500

**Entity Name:** AGILITY AVENUE LLC

**Current Principal Place of Business:**

2640 S MOORE DR  
LAKEWOOD, CO 80227

**Current Mailing Address:**

2640 S MOORE DR  
LAKEWOOD, CO 80227 US

**FEI Number:** 20-3469841

**Certificate of Status Desired:** No

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

BUSINESS FILINGS INCORPORATED  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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:** MARK WILLIAMS

03/04/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MEMBER  
Name SAA, JUAN C.  
Address 2640 S MOORE DR, UNIT 104  
City-State-Zip: LAKEWOOD CO 80227

Title PRESIDENT  
Name SAA, JUAN C.  
Address 2640 S MOORE DR, UNIT 104  
City-State-Zip: LAKEWOOD CO 80227

Title VICE-PRESIDENT  
Name SAA, JUAN C.  
Address 2640 S MOORE DR, UNIT 104  
City-State-Zip: LAKEWOOD CO 80227

Title SECRETARY  
Name SAA, JUAN C.  
Address 2640 S MOORE DR, UNIT 104  
City-State-Zip: LAKEWOOD CO 80227

Title TREASURER  
Name SAA, JUAN C.  
Address 2640 S MOORE DR, UNIT 104  
City-State-Zip: LAKEWOOD CO 80227

*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:** JUAN C. SAA

MGRM

03/04/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date