

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000063331

Entity Name: TRIPPE FAMILY LLC

Current Principal Place of Business:

623 WILLIAM STREET
KEY WEST, FL 33040

Current Mailing Address:

623 WILLIAM STREET
KEY WEST, FL 33040

FEI Number: 27-4409444

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TRIPPE, STEPHEN M
623 WILLIAM STREET
KEY WEST, FL 33040 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
Name TRIPPE, STEPHEN M
Address 623 WILLIAM STREET
City-State-Zip: KEY WEST FL 33040

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: STEPHEN TRIPPE

MGRM

03/02/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date