

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000114598

**Entity Name:** MIDDLE EAST PROPERTY PORTFOLIOS - TRANCHE 1, LLC

\*\*\*\*\*PLEASE NOTE\*\*\*\*\*GIVE DOCUMENT TO JERALINE\*\*\*\*\*

**FILED**  
**Apr 06, 2016**  
**Secretary of State**  
**CC5857721718**

**Current Principal Place of Business:**

217 N. WESTMONTE DRIVE  
SUITE 2011  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

217 N. WESTMONTE DRIVE  
SUITE 2011  
ALTAMONTE SPRINGS, FL 32714 US

**FEI Number:** 27-3845715

**Certificate of Status Desired:** No

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

KELLEY, KYLE  
217 N. WESTMONTE DRIVE  
SUITE 2011  
ALTAMONTE SPRINGS, FL 32714 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:** KYLE KELLEY

04/06/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name AINGER, CARL  
Address 217 N. WESTMONTE DRIVE  
SUITE 2011  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title MGR  
Name GAMALI, TAMER  
Address 217 N. WESTMONTE DRIVE  
SUITE 2011  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

*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:** CARL AINGER

**MANAGER**

04/06/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date