

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000120882

**Entity Name:** TRIPLE P, LLC

**Current Principal Place of Business:**

1265 LANDS END ROAD  
MANALAPAN, FL 33462

**Current Mailing Address:**

1265 LANDS END ROAD  
MANALAPAN, FL 33462

**FEI Number:** 36-4683846

**Certificate of Status Desired:** No

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

STROMBERG, SAMUEL D. ESQ.  
3000-8 HARTLEY ROAD  
JACKSONVILLE, FL 32257 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:** SAMUEL D. STROMBERG

04/29/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	MCMILLAN, CHARLES S	Name	MCMILLAN, GAIL S
Address	1265 LANDS END ROAD	Address	1265 LANDS END ROAD
City-State-Zip:	MANALAPAN FL 33462	City-State-Zip:	MANALAPAN FL 33462

*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:** CHARLES MCMILLAN

MGMR

04/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date