2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000033601

Entity Name: AIRGLADES INTERNATIONAL AIRPORT, LLC

Current Principal Place of Business:

111 PONCE DE LEON AVE. CLEWISTON, FL 33440

Current Mailing Address:

111 PONCE DE LEON AVE. CLEWISTON, FL 33440 US

FEI Number: 45-4781198

Name and Address of Current Registered Agent:

KURTZ, LUKE 111 PONCE DE LEON AVE. CLEWISTON, FL 33440 US Certificate of Status Desired: No

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

Authorized Person(s) Detail :

/			
Title	MGR	Title	MGR
Name	HARRISON, JR., CHARLES W.	Name	SANDRI, DAVID M
Address	5201 BLUE LAGOON DRIVE SUITE 200	Address	5201 BLUE LAGOON DRIVE SUITE 200
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126
Title	MGR	Title	MGR
Name	HILLIARD, JR, JOE	Name	WOOD, ELAINE M
Address	5500 FLAGHOLE RD	Address	111 PONCE DE LEON AVE.
City-State-Zip:	CLEWISTON FL 33440	City-State-Zip:	CLEWISTON FL 33440
Title	MGR, CHAIRMAN	Title	MGR
Name	HILLIARD-CARROLL, MARY ELIZABETH	Name	IRICK, JR., STEPHEN C
Address	5500 FLAGHOLE RD	Address	5201 BLUE LAGOON DRIVE SUITE 200
City-State-Zip:	CLEWISTON FL 33440	City-State-Zip:	MIAMI FL 33126
Title	VC, MANAGER, CEO	Title	SECRETARY
Name	WADE, JR., MALCOLM S.	Name	KURTZ, LUKE
Address		Address	111 PONCE DE LEON AVE.
	111 PONCE DE LEON AVE	Address	THE ONOL DE LEON AVE.
City-State-Zip:		City-State-Zip:	

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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: ELAINE WOOD

MANAGER

02/14/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Feb 14, 2023 Secretary of State 9732792277CC

Date

Authorized Person(s) Detail Continued :

Title	VP
Name	GALINDO, HERMAN
Address	5500 FLAGHOLE RD
City-State-Zip:	CLEWISTON FL 33440