

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000080077

**Entity Name:** HESPERRHODOS, LLC

**Current Principal Place of Business:**

1564 GORMICAN LANE  
NAPLES, FL 34110

**Current Mailing Address:**

1564 GORMICAN LANE  
NAPLES, FL 34110

**FEI Number:** 90-0861798

**Certificate of Status Desired:** No

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

WILLIAMSON, KYLE N.  
4099 TAMIAMI TRAIL N.  
SUITE 300  
NAPLES, FL 34103 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 N. WILLIAMSON

02/28/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	ROSE, PHILIP W	Name	ROSE, MICHELLE A
Address	1564 GORMICAN LANE	Address	1564 GORMICAN LANE
City-State-Zip:	NAPLES FL 34110	City-State-Zip:	NAPLES FL 34110

*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:** PHILIP W. ROSE

MGRM

02/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date