## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000132872

Entity Name: LANGLEY AG LLC

**Current Principal Place of Business:** 

1172 SOUTH DIXIE HWY PMB 257

CORAL GABLES, FL 33146

**Current Mailing Address:** 

1172 SOUTH DIXIE HWY **PMB 257** CORAL GABLES, FL 33146 US

FEI Number: 46-3801020 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ, JOSE R 1172 SOUTH DIXIE HWY PMB 257 CORAL GABLES, FL 33146 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: JOSE R GONZALEZ 04/07/2014

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **MANAGER** Title MANAGER

Name GONZALEZ, JOSE R Name GONZALEZ, LISA

1172 SOUTH DIXIE HWY 1172 SOUTH DIXIE HWY Address Address

PMB 257 PMB 257

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: CORAL GABLES FL 33146

Title **MANAGER** Title **MANAGER** 

Name GONZALEZ, ELSA Name GONZALEZ, LAUREN C

Address 1172 SOUTH DIXIE HWY Address 1172 SOUTH DIXIE HWY

> PMB 257 PMB 257

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: CORAL GABLES FL 33146

Title MANAGER Title **MANAGER** 

GONZALEZ, ALEXANDRA C GONZALEZ, JOSEPH P Name Name

1172 SOUTH DIXIE HWY 1172 SOUTH DIXIE HWY Address Address

> PMB 257 PMB 257

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: CORAL GABLES FL 33146

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.

04/07/2014 SIGNATURE: JOSE R. GONZALEZ **MANAGER** 

**FILED** Apr 07, 2014

**Secretary of State** 

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