

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000011386

**Entity Name:** TROPICAIRE INVESTMENTS, LLC

**Current Principal Place of Business:**

9769 S. DIXIE HIGHWAY  
SUITE 103  
MIAMI, FL 33155

**Current Mailing Address:**

9769 S. DIXIE HIGHWAY  
SUITE 103  
MIAMI, FL 33155

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

DANIELS, NICHOLAS M ESQ  
THERREL BAISDEN P.A.  
1 SE 3RD AVE. SUITE 2950  
MIAMI, FL 33131 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           MCCOMAS, JOHN KEITH  
Address        9769 S. DIXIE HIGHWAY  
                  SUITE 103  
City-State-Zip: MIAMI FL 33155

*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:** JOHN KEITH MCCOMAS

**MANAGER**

**01/27/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date