

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000034486

Entity Name: KOOLBREEZE HELICOPTERS LCC

Current Principal Place of Business:

10437 MOCCASIN GAP ROAD
TALLAHASSEE, FL 32309

Current Mailing Address:

10437 MOCCASIN GAP ROAD
TALLAHASSEE, FL 32309

FEI Number: 46-4952159

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CONNAN, ANDRE F
10437 MOCCASIN GAP ROAD
TALLAHASSEE, FL 32309 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 MGR
Name CONNAN, ANDRE F
Address 10437 MOCCASIN GAP ROAD
City-State-Zip: TALLAHASSEE FL 32309

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: ANDRE F CONNAN

MGR

02/11/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date