

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000135740

**Entity Name:** AURELIA, LLC

**Current Principal Place of Business:**

55 NORTH CENTRAL AVE  
UMATILLA, FL 32784

**Current Mailing Address:**

PO BOX 160305  
ALTAMONTE SPRINGS, FL 32716 US

**FEI Number:** 47-1711618

**Certificate of Status Desired:** No

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

RAGAN, GREG  
55 NORTH CENTRAL AVE  
UMATILLA, FL 32784 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 MCNAMARA, JOHN  
Address 55 NORTH CENTRAL AVE  
City-State-Zip: UMATILLA FL 32784

Title MGR  
Name MCNAMARA, MEM  
Address 55 NORTH CENTRAL AVE  
City-State-Zip: UMATILLA FL 32784

*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 MCNAMARA

**MGR**

**03/29/2016**

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

\_\_\_\_\_  
Date