

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000168909

**Entity Name:** TAMPA BAY ALLIANCE LLC

**Current Principal Place of Business:**

12000 N DALE MABRY HWY  
SUITE 226  
TAMPA, FL 33618

**Current Mailing Address:**

12000 N DALE MABRY HWY  
SUITE 226  
TAMPA, FL 33618 US

**FEI Number:** 81-3808181

**Certificate of Status Desired:** No

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

DA SILVA, CLEONCIO  
12000 N DALE MABRY HWY  
SUITE 226  
TAMPA, FL 33618 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:** CLEONCIO DA SILVA

04/10/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name DA SILVA, CLEONCIO S  
Address 19241 FISHERMANS BEND DR  
City-State-Zip: LUTZ FL 33558

Title MGR  
Name DA SILVA, MARIA ANGELICA V  
Address 12000 N DALE MABRY HWY  
SUITE 226  
City-State-Zip: TAMPA FL 33618

*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:** CLEONCIO DA SILVA

MGR

04/10/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date