

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000228429

**FILED**  
**Apr 17, 2018**  
**Secretary of State**  
**CC7115620062**

**Entity Name:** TTBAF MANAGEMENT LLC

**Current Principal Place of Business:**

2410 NORTHSIDE DR  
CLEARWATER, FL 33761

**Current Mailing Address:**

13234 TELECOM DR  
TAMPA, FL 33646 US

**FEI Number:** 81-4744803

**Certificate of Status Desired:** No

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

AXIOM BUSINESS CONSULTING, LLC  
13234 TELECOM DR  
TAMPA, FL 33637 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 JAIN, KUNAL  
Address 2410 NORTHSIDE DR  
City-State-Zip: CLEARWATER FL 33761

Title MGR  
Name COVER2 TIE ANGEL FUND LLC  
Address 5509 W GRAY ST, SU 200  
City-State-Zip: TAMPA FL 33609

Title MGR  
Name NAMO VENTURES LLC  
Address 13234 TELECOM DR  
City-State-Zip: TAMPA FL 33637

*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:** SEEMA JAIN

**MANAGING PARTNER**

**04/17/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date