

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000258960

**Entity Name:** AERIAL INSPECTION & MAPPING IMAGES LLC

**Current Principal Place of Business:**

1235 PIN OAK CT  
WHEATON, IL 60189

**Current Mailing Address:**

PO BOX 585  
WARRENVILLE, IL 60555 US

**FEI Number:** 82-4000110

**Certificate of Status Desired:** No

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

NORTHWEST REGISTERED AGENT LLC.  
7901 4TH STREET N,  
SUITE 300  
ST.PETERSBURG, FL 33702 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:** TOM GLOVER

03/01/2019

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Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGING MEMBER  
Name           THE GLEN VALLEY TRUST  
Address       PO BOX 585  
City-State-Zip: WARRENVILLE IL 60555

*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:** BRAD HAYES

**MANAGER**

03/01/2019

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Electronic Signature of Signing Authorized Person(s) Detail

Date