

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M00000001711

**Entity Name:** CTFLO, L.L.C.

**Current Principal Place of Business:**

10117 S. FEDERAL HWY  
PORT ST. LUCIE, FL 34952

**Current Mailing Address:**

214 S. ROCK ROAD, STE. 101  
WICHITA, KS 67207

**FEI Number:** 48-1226651

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 MGRM  
Name WILSON ENTERPRISES OF MAINE  
INC.  
Address 214 S. ROCK ROAD, STE. 101  
City-State-Zip: WICHITA KS 67207

*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:** GEORGE E. WILSON JR

**MEMBER**

**03/09/2017**

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

\_\_\_\_\_  
Date