

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M12000006520

**Entity Name:** TROPICAL AIR KEY WEST, LLC

**Current Principal Place of Business:**

2784 N. ROOSEVELT BLVD.  
KEY WEST, FL 33040

**Current Mailing Address:**

2784 N. ROOSEVELT BLVD.  
KEY WEST, FL 33040

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

FLOYD, JULIE ANN  
2784 N. ROOSEVELT BLVD.  
KEY WEST, FL 33040 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            PRES  
Name            FLOYD, JULIE ANN  
Address        2784 N. ROOSEVELT BLVD.  
City-State-Zip: KEY WEST FL 33040

*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:** JULIE ANN FLOYD

**PRES**

**04/15/2017**

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

\_\_\_\_\_  
Date