

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000025872

Entity Name: PAPA ROMEO, LLC

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

32801 HIGHWAY 441 NORTH  
LOT 287  
OKEECHOBEE, FL 34972

**New Principal Place of Business:**

**Current Mailing Address:**

32801 HIGHWAY 441 NORTH  
LOT 287  
OKEECHOBEE, FL 34972

**New Mailing Address:**

FEI Number: 20-2424072

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RAGON, JOE  
32801 HWY 441 NORTH  
268  
OKEECHOBEE, FL 34972 US

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

RAGON, JOE  
32801 HWY 441 NORTH  
LOT 268  
OKEECHOBEE, FL 34972 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: JOSEPH RAGON

04/19/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: TLC AVIATION SERVICES, INC.  
Address: 32801 HWY 441 NORTH #287  
City-St-Zip: OKEECHOBEE, FL 34972

Title: MGRM  
Name: POTTER, KENNETH  
Address: 32801 HWY 441 NORTH 287  
City-St-Zip: OKEECHOBEE, FL 34972

Title: MGRM  
Name: RAGON, JOE  
Address: 32801 HWY 441 NORTH LOT 268  
City-St-Zip: OKEECHOBEE, FL 34972

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JOSEPH RAGON

MGRM

04/19/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date