## FILE NOW: Fee after May 1, will be \$588.75

P					<del></del>	=			
LIMITE	D LIABILITY COMPANY 🔏		FLORIDA DEP	ARTME	NT OF STATE	1			
ANNUAL REPORT 1997			Sandra B. Mortham  Secretary of State  DIVISION OF CORPORATIONS			FILED			
FILING	5 Corporation Su	Corporation Supplemental Fee			15 PM	3: 34			
\$ 203.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE						7		•	
1. Name and Mailing Address of Limited Liability Company DOCUMENT #195000000343						TALLAH	ARY OF ST ISSEE, FLO	RIDA	
TORTUGA GROUP, L.C.						1a. Principal Pla	ice of Business	Address	
3575 BONITA BEACH ROAD BONITA SPRINGS FL 33923 34134						3575 BONITA BEACH ROAD BONITA SPRINGS FI. 33923 34134			
	mailing address is incorrect in any way, line thre					ad as Overlead	3s. State of Formation		
2 Principal Place of Business 2a. I			ailing Address			3. Date Organiz			
Suite, Apt #, etc.			Suite, Apt. #, etc.			05/05/19 4. FEI Number	95 .	FL	
City & State			City & State			4		Applied For	
City & Sta	3.60	City &	City & State			65-0575798  5. Date of Last Report 6		Not Applicable	
Ζip	Country	Zip		Countr	У			6. Certificate of Status Desired  SB 75 Additional for Required	
	7. Name and Address of Current		4134	<u>L</u>		04/29/19			
	a Agent		Name	6. Name and Add	Iress of New He	gistered Agent			
ERDMA: 357/5 :		Street Address			(P.O. Box Number is Not Acceptable)				
BONTT.									
₹		Sulte, Apt. #, etc.							
		City			FL	Zip Code			
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changin its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment									
as registered agent, and accept the obligations.									
SIGNATURE DATE  (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating)									
(Registered Agent Accepting Appointment) (  10. Title Managing Members/Managers			(NOTE Hegistered Ag	NOTE Registered Agent signature required when reinstating  Business Street Address			City, State and Zip Code		
10. The managing wembers wanagers						·····	,		
MGRM .	ERDMAN, CHARLES J	JR.	JR. 3575 BONIT		BEACH R	ROAD	ATINOS	SPRINGS FL	
							34134		
Ì									
j		}	<b>80002184038</b> 6 -05/19/9701187026 *****203.75 *****203.75						
					※※※米	U3.75 < ****2U3.75			
ł			1					.,	
•									
Ì			1						
J	j								
Ì								Na	
								16-15-97	
11 I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the Information									
indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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; and that my name appears in Block 10, or on an									
	nt with an address.	> \	/	<del>-</del>	· · · · · · · · · · · · · · · · · · ·			1.*	
SIGNATURE: ( / ) 4/23/97 941-992-8833									
}		ED OR PRINTE	D NAME OF SIGNING N	MANAGING	MEMBER OR MANAGER		Date	Daytime Phone ≢	