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: SADIQUE JAFFER	

MGRM

04/16/2018

2018 FLORIDA LIMITED LIABILITY CC	MPANY ANNUAL REPORT

## DOCUMENT# L0000000466

Entity Name: AIRPORT INDUSTRIAL PARTNERS, LLC

## **Current Principal Place of Business:**

**153 PARLIAMENT LOOP** LAKE MARY, FL 32746

## **Current Mailing Address:**

**153 PARLIAMENT LOOP** LAKE MARY, FL 32746 US

## FEI Number: 59-3625282

# Name and Address of Current Registered Agent:

BARFIELD, WILLIAM 225 S. SUITE

SIGNATURE	: WILLIAM BARFIELD			04/16/2018
	Electronic Signature of Registered Agent			Date
Authorized I	Person(s) Detail :			
Title	MGRM	Title	MGRM	
Name	JAFFER, SADIQUE	Name	JAFFER, MOHAMEDTAKI	
Address	153 PARLIAMENT LOOP	Address	153 PARLIAMENT LOOP	
City-State-Zip:	LAKE MARY FL 32746	City-State-Zip:	LAKE MARY FL 32746	

S. WESTMONT AVE. TE 2040 MONTE SPRINGS, FL 32714 US							
bove named e	entity submits this statement for the purpose of chan	nging its registered office or reg	gistered agent, or both, in the State of I	Florida.			
NATURE:	WILLIAM BARFIELD			04/16/2018			
	Electronic Signature of Registered Agent			Date			
horized P	erson(s) Detail :						
	MGRM	Title	MGRM				
e .	JAFFER, SADIQUE	Name	JAFFER, MOHAMEDTAKI				
ess	153 PARLIAMENT LOOP	Address	153 PARLIAMENT LOOP				

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 16, 2018 **Secretary of State** CC3135715551

Certificate of Status Desired: No

Date