

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000065205

**Entity Name:** TARAGONA ENTERPRISE, LLC

**Current Principal Place of Business:**

6900 S. ORANGE BLOSSOM TRAIL  
SUITE 432  
ORLANDO, FL 32909

**Current Mailing Address:**

6900 S. ORANGE BLOSSOM TRAIL  
SUITE 432  
ORLANDO, FL 32909

**FEI Number:** 75-3245191

**Certificate of Status Desired:** No

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

BOUCHENOT, SOPHIE  
% MINEOLA CONSULTING, INC.  
6900 S. ORANGE BLOSSOM TRAIL, #432  
ORLANDO, FL 32809 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 LOCKWOOD, DAVID  
Address 6900 S. ORANGE BLOSSOM TRAIL  
City-State-Zip: ORLANDO FL 32909

Title MGRM  
Name LOCKWOOD, NATHALIE  
Address 6900 S. ORANGE BLOSSOM TRAIL  
City-State-Zip: ORLANDO FL 32909

*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:** LOCKWOOD , DAVID

**MGR**

**02/04/2018**

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

\_\_\_\_\_  
Date