

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000054040

Entity Name: 246 APACHE LLC

Current Principal Place of Business:

246 APACHE ST
TAVERNIER, FL 33070

Current Mailing Address:

479 THORNTON ROAD
PO BOX 144
THORNTON, PA 19373 US

FEI Number: 27-0296704

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEAN, BONNES
11902 SW 110 STREET CIRCLE EAST
MIAMI, FL 33186 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 MGR
Name BONNES, JOSEPH P
Address 254 CEDAR RIDGE ROAD
City-State-Zip: WEST CHESTER PA 19380

Title MGRM
Name BONNES, PETER J
Address 479 THORNTON ROAD
City-State-Zip: THORNTON PA 19373

Title MGRM
Name BONNES, MARINA
Address 479 THORNTON ROAD
City-State-Zip: THORNTON PA 19373

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: MARINA BONNES

MGRM

01/12/2015

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date