

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000119292

Entity Name: BLACK TREE GROUP, LLC

Current Principal Place of Business:

5801 BENJAMIN CENTER DRIVE
SUITE 106
TAMPA, FL 33634

Current Mailing Address:

5801 BENJAMIN CENTER DRIVE
SUITE 106
TAMPA, FL 33634 US

FEI Number: 27-3982625

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOPCROFT, TROY D
5801 BENJAMIN CENTER DRIVE
SUITE 106
TAMPA, FL 33634 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 HOPCROFT, TROY D
Address 5801 BENJAMIN CENTER DRIVE
SUITE 106
City-State-Zip: TAMPA FL 33634

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: TROY D. HOPCROFT

MEMBER/CEO

03/08/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date