## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000130444

Entity Name: AARGUS LLC

**Current Principal Place of Business:** 

1431 PINE STREET TALLAHASSEE, FL 32303

**Current Mailing Address:** 

P.O. BOX 12546

TALLAHASSEE. FL 32317-2546

FEI Number: 46-5185493 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCHAFFIE, THOMAS 1431 PINE STREET TALLAHASSEE, FL 32303 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

**FILED** Feb 12, 2019

**Secretary of State** 

6938395480CC

## Authorized Person(s) Detail:

Title MGRM

Name MCHAFFIE, THOMAS Address P.O. BOX 12546

City-State-Zip: TALLAHASSEE FL 32317-2546

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: THOMAS MCHAFFIE

**MGR** 

02/12/2019