

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000157010

**Entity Name:** LIMESTONE AQ FIVE, LLC

**Current Principal Place of Business:**

C/O ORION INVEST AND MGMT LTD. CORP.  
200 SOUTH BISCAYNE BLVD., 7TH FLOOR  
MIAMI, FL 33131

**Current Mailing Address:**

C/O ORION INVEST AND MGMT LTD. CORP.  
200 SOUTH BISCAYNE BLVD., 7TH FLOOR  
MIAMI, FL 33131 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

BROWN, BYRON M ATTY.  
C/O ORION INVEST. 200 S. BISCAYNE BLVD  
7TH FLOOR  
MIAMI, FL 33131 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	Title	MGR
Name	SANZ, JOSEPH A	Name	AL-RASHID, IBRAHIM
Address	200 S. BISCAYNE BLVD., 7TH FLOOR	Address	200 SOUTH BISCAYNE BLVD., 7TH FLOOR
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

*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:** SANZ , JOSEPH A

**MGR**

**03/13/2018**

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

\_\_\_\_\_  
Date