

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000163976

**Entity Name:** TARTINI AT ROCK SPRINGS RIDGE, LLC**Current Principal Place of Business:**625 ROCK RIDGE BOULEVARD  
APOPKA, FL 32712**Current Mailing Address:**625 ROCK RIDGE BOULEVARD  
APOPKA, FL 32712 US**FEI Number:** 46-4164891**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MERRIWEATHER, WILLIAM BRANDON  
625 ROCK RIDGE BOULEVARD  
APOPKA, FL 32712 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:** WILLIAM MERRIWEATHER

01/09/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER  
Name MULLER, THOMAS  
Address 625 ROCK RIDGE BOULEVARD  
City-State-Zip: APOPKA FL 32712

Title MANAGER  
Name MERRIWEATHER, WILLIAM BRANDON  
Address 625 ROCK RIDGE BOULEVARD  
City-State-Zip: APOPKA FL 32712

Title AUTHORIZED MEMBER  
Name HANDY, MIKE  
Address 625 ROCK RIDGE BOULEVARD  
City-State-Zip: APOPKA FL 32712

Title AUTHORIZED MEMBER  
Name GLOVER, RAYMOND  
Address 625 ROCK RIDGE BOULEVARD  
City-State-Zip: APOPKA FL 32712

*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 MULLER**MEMBER**

01/09/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date