## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000083319

**Entity Name: AEROQUEST LLC** 

**Current Principal Place of Business:** 

304 INDIAN TRACE

527

WESTON, FL 33326

**Current Mailing Address:** 

304 INDIAN TRACE

527

WESTON, FL 33326

FEI Number: 36-4786430 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOUTH FLORIDA CPA FINANCIAL, INC. 12555 ORANGE DRIVE

DAVIE, FL 33330 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** Jun 09, 2015

**Secretary of State** 

CC6463149542

## Authorized Person(s) Detail:

Title MGR

Name ARDILA, ALBERTO

304 INDIAN TRACE #527 Address

City-State-Zip: WESTON FL 33326

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.

06/09/2015 SIGNATURE: ALBERTO ARDILA **MGR**