

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000188219

**Entity Name:** CF OPERATIONS, LLC

**Current Principal Place of Business:**

10065 EMERALD COAST PARKWAY  
STE. C201A  
MIRAMAR BEACH, FL 32550

**Current Mailing Address:**

10065 EMERALD COAST PARKWAY  
STE. C201A  
MIRAMAR BEACH, FL 32550 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CHAUHAN, MANOJ  
10065 EMERALD COAST PARKWAY  
STE. C201A  
MIRAMAR BEACH, FL 32550 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 CHAUHAN, VICK  
Address 10065 EMERALD COAST PKWY, STE C201A  
City-State-Zip: MIRAMAR BEACH FL 32550

Title MGR  
Name CHAUHAN, RAKESH  
Address 10065 EMERALD COAST PKWY, STE C201A  
City-State-Zip: MIRAMAR BEACH FL 32550

Title MGR  
Name CHAUHAN, MANOJ  
Address 10065 EMERALD COAST PKWY, STE. C201A  
City-State-Zip: MIRAMAR BEACH FL 32550

*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:** MANOJ CHAUHAN

**ORGANIZER**

**04/14/2016**

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

\_\_\_\_\_  
Date