I ler s; and 0 that my name appears above, or on an attachment with all other like empowered. 04/29/2016

SIGNATURE: OREN SCHNEIDEROVITCH

Electronic Signature of Signing Authorized Person(s) Detail

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000065253

Entity Name: TROPICAL PROPERTY INVESTMENT GROUP LLC

Current Principal Place of Business:

2711 TAMIAMI TRAIL UNIT C PORT CHARLOTTE, FL 33952

Current Mailing Address:

2711 TAMIAMI TRAIL UNIT C PORT CHARLOTTE, FL 33952

FEI Number: 90-1032382

Name and Address of Current Registered Agent:

PURCELL, ERIC 2711 TAMIAMI TRAIL UNIT C PORT CHARLOTTE, FL 33952 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

Authorized Person(s) Detail :

Title	MGR	Title	AMBR
Name	PURCELL, ERIC	Name	SCHNEIDEROVITCH, OREN
Address	2711 TAMIAMI TRAIL UNIT C	Address	2711 TAMIAMI TRAIL UNIT C
City-State-Zip:	PORT CHARLOTTE FL 33952	City-State-Zip:	PORT CHARLOTTE FL 33952

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 unde
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;

MGMR

Date

FILED Apr 29, 2016 Secretary of State CC4163695977

Certificate of Status Desired: No

Date