

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000191496

Entity Name: AIR & GROUND CINEMATOGRAPHY, LLC

Current Principal Place of Business:

4941 SW 74 CT
MIAMI, FL 33165

Current Mailing Address:

AIR & GROUND CINEMATOGRAPHY, LLC
P.O. BOX 560482
MIAMI, FL 33256

FEI Number: 81-4238356

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SALAZAR, LISSETTE M
4941 SW 74 CT
MIAMI, FL 33165 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 | AMBR | Title | MGR |
| Name | SALAZAR, LISSETTE M | Name | SALAZAR, NICHOLAS M |
| Address | 4941 SW 74 CT | Address | 4941 SW 74 CT |
| City-State-Zip: | MIAMI FL 33165 | City-State-Zip: | MIAMI FL 33165 |
| | | | |
| Title | MGR | | |
| Name | SALAZAR, SAMANTHA N | | |
| Address | 4941 SW 74 CT | | |
| City-State-Zip: | MIAMI FL 33165 | | |

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: LISSETTE SALAZAR

AMBR

03/12/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date