

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000191857

Entity Name: TFRS9 LLC

Current Principal Place of Business:

9101 W COLLEGE POINTE DR
1
FORT MYERS, FL 33919

Current Mailing Address:

PO BOX 1662
FORT MYERS, FL 33902 US

FEI Number: 81-4915887

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MADDEN LAW FIRM, LLC
2277 MAIN ST.
FORT MYERS, FL 33901 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 GARNER, TIFFANY
Address 9101 W COLLEGE POINTE DR., STE 1
City-State-Zip: FORT MYERS FL 33919

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: TIFFANY GARNER

MGR

01/10/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date