2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 28, 2018
Secretary of State
CC1327038773

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Entity Name: TRIPLE BREEZE, LLC

Current Principal Place of Business:

618 BELLE ISLE AVE
BELLEAIR BEACH, FL 33786

Current Mailing Address:

618 BELLE ISLE AVE.
BELLEAIR BEACH, FL 33786 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GAGNON, CHRISTIE V
618 BELLE ISLE AVE.
BELLEAIR BEACH, FL 33786 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	AMBR
Name	GAGNON, CHRISTIE V	Name	GAGNON, CHAD E
Address	618 BELLE ISLE AVE.	Address	618 BELLE ISLE AVE.
City-State-Zip:	BELLEAIR BEACH FL 33786	City-State-Zip:	BELLEAIR BEACH FL 33786

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: CHRISTIE V GAGNON MGR 02/28/2018

Electronic Signature of Signing Authorized Person(s) Detail — Date