

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000110494

**Entity Name:** 6450 ARAGON 306, LLC

**Current Principal Place of Business:**

6450 ARAGON WAY  
UNIT 202  
FORT MYERS, FL 33966

**Current Mailing Address:**

6450 ARAGON WAY  
UNIT 202  
FORT MYERS, FL 33966 US

**FEI Number:** 82-1690675

**Certificate of Status Desired:** No

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

CRANFILL, SCOTT  
6450 ARAGON WAY  
UNIT 202  
FORT MYERS, FL 33966 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            CRANFILL, SCOTT  
Address        6450 ARAGON WAY, UNIT 202  
City-State-Zip: FORT MYERS FL 33966

Title            MGR  
Name            CRANFILL, KATHRYN  
Address        6450 ARAGON WAY, UNIT 202  
City-State-Zip: FORT MYERS FL 33966

*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:** SCOTT CRANFILL

**MGR**

**02/02/2018**

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

\_\_\_\_\_  
Date