

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000153406

**Entity Name:** C&C AG. TRANSPORTS, LLC

**Current Principal Place of Business:**

240 WILSON DRIVE  
LABELLE, FL 33935

**Current Mailing Address:**

16034 VIA SOLERA CIR  
104  
FORT MYERS, FL 33908 US

**FEI Number:** 83-0985921

**Certificate of Status Desired:** No

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

BRUN, JONA  
16034 VIA SOLERA  
104  
FT MYERS, FL 33908 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              | Title           | AMBR             |
| Name            | FLORES, JUAN SR. | Name            | BRUN, JONA       |
| Address         | 240 WILSON DRIVE | Address         | 240 WILSON DRIVE |
| City-State-Zip: | LABELLE FL 33935 | City-State-Zip: | LABELLE FL 33935 |

*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:** JONA BRUN

MGR

03/13/2019

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

\_\_\_\_\_  
Date