SIGNATURE: CHRISTINA ALLMAN **GENERAL PARTNER**

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name

Electronic Signature of Signing General Partner Detail

DOCUMENT# A1300000690 Entity Name: ALLMAN CAPITAL SOLUTIONS FAMILY LLLP

2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

Current Principal Place of Business:

151 N. NOB HILL ROAD 336 PLANTATION, FL 33322

Current Mailing Address:

151 N. NOB HILL ROAD 336 PLANTATION, FL 33322 US

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

TOLLEY, RACHEL L 2600 S. DOUGLAS ROAD 1008 CORAL GABLES, FL 33134 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

General Partner Detail :

Document # ALLMAN, CHRISTINA Name 151 N. NOB HILL ROAD, STE 336 Address City-State-Zip: PLANTATION FL 33322

FILED Mar 25, 2015 Secretary of State CC6590928547

Certificate of Status Desired: No

Date

03/25/2015

Date

appears above, or on an attachment with all other like empowered.