

**2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A13000000690

**Entity Name:** ALLMAN CAPITAL SOLUTIONS FAMILY LLLP

**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

**Certificate of Status Desired:** No

**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

\_\_\_\_\_  
Date

**General Partner Detail :**

Document #

Name ALLMAN, CHRISTINA

Address 151 N. NOB HILL ROAD, STE 336

City-State-Zip: PLANTATION FL 33322

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

**SIGNATURE:** CHRISTINA ALLMAN

**GENERAL PARTNER**

**03/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date