

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000001965

Entity Name: AARON M. MCKOWN, P.A.

Current Principal Place of Business:

1 ALHAMBRA PLZ, STE 620
CORAL GABLES, FL 33134

Current Mailing Address:

1 ALHAMBRA PLZ, STE 620
CORAL GABLES, FL 33134 US

FEI Number: 46-4441599

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAILEY, JEFFREY S
1 ALHAMBRA PLZ, STE 620
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

Officer/Director Detail :

Title PST
Name MCKOWN, AARON M
Address 1 ALHAMBRA PLZ, STE 620
City-State-Zip: CORAL GABLES FL 33134

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: AARON MCKOWN

MANAGING MEMBER

02/24/2015

Electronic Signature of Signing Officer/Director Detail

Date