# 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: KATRINA MATTER

Electronic Signature of Signing Officer/Director Detail

Entity Name: BKM ACCOUNTING, INC.

### **Current Principal Place of Business:**

3154 SWEETGUM STREET THE VILLAGES. FL 32163

### **Current Mailing Address:**

3154 SWEETGUM STREET THE VILLAGES. FL 32163 US

## FEI Number: 82-2097276

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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:

**Officer/Director Detail :** Title Title P. D T.S Name MATTER, KATRINA Name MATTER, BRYAN 3154 SWEETGUM STREET Address City-State-Zip: THE VILLAGES FL 32163

Address

Electronic Signature of Registered Agent

ne and Address of Current Registered Agent:	
TER, KATRINA SWEETGUM STREET VILLAGES, FL 32163 US	

Date

Certificate of Status Desired: No

3154 SWEETGUM STREET City-State-Zip: THE VILLAGES FL 32163

PRESIDENT

03/10/2020

Date