

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000069057

Entity Name: ACME OPERATIONS, LLC

Current Principal Place of Business:

7799 STYLES BLVD
KISSIMMEE, FL 34747

Current Mailing Address:

VERA GONSALVES
7799 STYLES BLVD
KISSIMMEE, FL 34747 US

FEI Number: 20-5178819

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONSALVES, VERA
7799 STYLES BLVD
KISSIMMEE, FL 34747 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: VERA GONSALVES

05/03/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | | | |
|-----------------|----------------------------|-----------------|--------------------|
| Title | DP | Title | VP, SECRETARY |
| Name | SAHNI, DEEPINDER S | Name | GONSALVES, VERA |
| Address | 7799 STYLES BLVD | Address | 7799 STYLES BLVD |
| City-State-Zip: | KISSIMMEE FL 34747 | City-State-Zip: | KISSIMMEE FL 34747 |
| | | | |
| Title | TREASURER, ASST. SECRETARY | | |
| Name | BROWN, RICARDO | | |
| Address | 7799 STYLES BLVD | | |
| City-State-Zip: | KISSIMMEE FL 34747 | | |

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: VERA GONSALVES

VP

05/03/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date