BEELE 13EE, 1 E 32003 03				
FEI Number: 26-2204484			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
DESALVO, GRE 2827 NELA AVE BELLE ISLE, FL				
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.				
The above named	l entity submits this statement for the purpose of changing its regis	terea onice or regis	lered agent, or both, in the State of F	lorida.
	l entity submits this statement for the purpose of changing its regis GREGORY DESALVO	tered office or regis	tered agent, or both, in the State of F	01/09/2017
		tered office or regis	tereo agent, or both, in the State of P	
SIGNATURE	GREGORY DESALVO	terea onice or regis	tered agent, or both, in the State of P	01/09/2017
SIGNATURE	CREGORY DESALVO	Title	MGRM	01/09/2017
SIGNATURE	GREGORY DESALVO     Electronic Signature of Registered Agent  Person(s) Detail :			01/09/2017
SIGNATURE Authorized I	GREGORY DESALVO     Electronic Signature of Registered Agent Person(s) Detail :     MGRM	Title	MGRM	01/09/2017

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: GREGORY DESALVO

Electronic Signature of Signing Authorized Person(s) Detail

MEMBER

01/09/2017 Date

## FILED Jan 09, 2017 **Secretary of State** CC9461833884

## Entity Name: A CASH ACT LLC

DOCUMENT# L07000098290

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

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

2827 NELA AVE BELLE ISLE, FL 32809

## **Current Mailing Address:**

2827 NELA AVE BELLE ISLE, FL 32809 US