

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000096555

Entity Name: HELVEX GROUP, LLC

Current Principal Place of Business:

3020 NE 32 AVE
UNIT 1518
FT. LAUDERDALE, FL 33308-7232

Current Mailing Address:

PO BOX 8597
CINCINNATI, OH 45208-0597 US

FEI Number: 26-3576520

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BIK, CHRISTOPHER
3020 NE 32 AVE
UNIT 1518
FT. LAUDERDALE, FL 33308-7232 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: CHRISTOPHER BIK

01/22/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name MOORE, KATHERINE K
Address P O BOX 8597
City-State-Zip: CINCINNATI OH 45208-0597

Title MGR
Name MOORE OWEN MANAGEMENT SERVICES INC
Address PO BOX 8597
City-State-Zip: CINCINNATI OH 45208-0597

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: KATHERINE K. MOORE

MANAGING MEMBER

01/22/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date