## 2017 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 03/05/2017

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGRM Title MGR

Name MOORE, KATHERINE K Name MOORE OWEN MANAGEMENT

SERVICES INC

FILED Mar 05, 2017

**Secretary of State** 

CC2288901310

Address P O BOX 8597 Address PO BOX 8597

City-State-Zip: CINCINNATI OH 45208-0597 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: K.KIMBERLY MOORE

MANAGING MEMBER

03/05/2017