2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000115338

Entity Name: AKAM LLC

Jan 17, 2017 **Secretary of State** CC5333936838

FILED

Current Principal Place of Business:

2000 PONCE DE LEON BLVD.

SUITE 600

CORAL GABLES, FL 33134

Current Mailing Address:

2000 PONCE DE LEON BLVD. SUITE 600 CORAL GABLES, FL 33134 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KRONFLE, EDMUNDO 2000 PONCE DE LEON BLVD. SUITE 600 CORAL GABLES, FL 33134 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:

Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGRM Title **MGRM**

INKRON LLC Name Name **BALMOR LLC**

2000 PONCE DE LEON BLVD, SUITE 18851 NE 29TH AVENUE SUITE 900 Address Address

AVENTURA FL 33180 City-State-Zip: City-State-Zip: CORAL GABLES FL 33134

Title **MGRM** Title **MGRM**

Name GARCIA, MADELAINE Name ANNEIROS, DENNIS

Address 18851 NE 29TH AVENUE SUITE 900 18851 NE 29TH AVENUE SUITE 900 Address

City-State-Zip: AVENTURA FL 33180 City-State-Zip: AVENTURA FL 33180

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.

01/17/2017 SIGNATURE: EDMUNDO KRONFLE **MGR**