

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000087097

**Entity Name:** 115 AKRON, LLC

**Current Principal Place of Business:**

505 NE 3RD STREET  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

505 NE 3RD STREET  
DELRAY BEACH, FL 33483 US

**FEI Number:** 27-2221436

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ZABIK, VINCE AMGR  
505 NE 3RD STREET  
DELRAY BEACH, FL 33483 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name ZABIK, VINCENT  
Address 505 NE 3RD STREET  
City-State-Zip: DELRAY BEACH FL 33483

*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:** VINCENT ZABIK

**MANAGER**

**02/13/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date