

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000030426

**Entity Name:** ALLPSE, L.L.C.

**Current Principal Place of Business:**

1849 S. OCEAN DR.  
1414  
HALLANDALE, FL 33009

**Current Mailing Address:**

1849 S. OCEAN DR.  
1414  
HALLANDALE, FL 33009

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SORSHER, ALEX  
900 N. FEDERAL HWY  
STE 306  
HALLANDALE, FL 33009 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 ZDANOVICH, HALINA  
Address 1849 S. OCEAN DR. STE 1414  
City-State-Zip: HALLANDALE FL 33009

Title MGRM  
Name ZAVADSKI, SIARHEI  
Address 1849 S. OCEAN DR. STE 1414  
City-State-Zip: HALLANDALE FL 33009

*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:** SIARHEI ZAVADSKI

**MGRM**

**04/26/2019**

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

\_\_\_\_\_  
Date