

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000080140

**Entity Name:** ALLIMAX GROUP, LLC

**Current Principal Place of Business:**

212 US HIGHWAY 1 SUITE 18  
TEQUESTA, FL 33469

**Current Mailing Address:**

212 US HIGHWAY 1, SUITE 18  
TEQUESTA, FL 33469 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

MURRAY, ALLISON  
135 LIGHTHOUSE DRIVE  
TEQUESTA, FL 33469 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:** ALLISON MURRAY

02/20/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	DIRECTOR	Title	DIRECTOR
Name	MURRAY, MAXWELL	Name	MURRAY, ALLISON
Address	212 US HIGHWAY 1, SUITE 18	Address	212 US HIGHWAY 1, SUITE 18
City-State-Zip:	TEQUESTA FL 33469	City-State-Zip:	TEQUESTA FL 33469

*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:** ALLISON MURRAY

**DIRECTOR**

02/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date