

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000131752

**Entity Name:** INSTANTS-167, LLC

**Current Principal Place of Business:**

1198 MAYPORT ROAD  
SUITE 1  
ATLANTIC BEACH, FL 32233

**Current Mailing Address:**

ONE HOUR A/C  
707 SAMMS AVE STE D  
PORT ORANGE, FL 32129 US

**FEI Number:** 27-4388041

**Certificate of Status Desired:** No

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

COX, DAVID J  
707 SAMMS AVENUE  
SUITE D  
PORT ORANGE, FL 32129 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            PRES  
Name            COX, DAVID J  
Address        707 SAMMS AVENUE, SUITE D  
City-State-Zip: PORT ORANGE FL 32129

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVID J COX

**MGR**

**04/17/2013**

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

\_\_\_\_\_  
Date