

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000010458

**Entity Name:** AFFILIATE REVENUE GROUP YIELD, LLC

**Current Principal Place of Business:**

19101 NE 36 COURT  
2706  
AVENTURA, FL 33180

**Current Mailing Address:**

PO BOX 813832  
HOLLYWOOD, FL 33081

**FEI Number:** 45-4093638

**Certificate of Status Desired:** No

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

ARGY, SHARON  
19101 NE 36 COURT  
2706  
AVENTURA, FL 33180 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 ARGY, SHARON  
Address PO BOX 813832  
City-State-Zip: HOLLYWOOD FL 33081

*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:** SHARON ARGY

MGRM

04/16/2015

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

\_\_\_\_\_  
Date