

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000051297

**Entity Name:** ADVANTAGE ALLIANCE, LLC

**Current Principal Place of Business:**

5000 MIDWAY RD#12293  
FORT PIERCE, FL 34979

**Current Mailing Address:**

5000 MIDWAY RD#12293  
FORT PIERCE, FL 34979 US

**FEI Number: 32-0340288**

**Certificate of Status Desired: No**

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

HINCAPIE, BYRON J  
5000 MIDWAY RD#12293  
FORT PIERCE, FL 34979 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 HINCAPIE, BYRON J  
Address 5000 MIDWAY RD#12293  
City-State-Zip: FORT PIERCE FL 34979

*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: HINCAPIE BYRON**

**MGRM**

**04/29/2019**

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

\_\_\_\_\_ Date