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: EDUARDO RODRIGUEZ

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: ALLEGIANT ACCOUNTING GROUP, LLC

DOCUMENT# L11000079046

Current Principal Place of Business:

5411 SHADY PINE ST. S JACKSONVILLE, FL 32244

Current Mailing Address:

5411 SHADY PINE ST. S JACKSONVILLE, FL 32244 US

FEI Number: 45-2706574

Name and Address of Current Registered Agent:

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

RODRIGUEZ, EDUARDO 5411 SHADY PINE ST. S JACKSONVILLE, FL 32244 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	: EDUARDO RODRIGUEZ			05/01/2021
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	MGRM	
Name	RODRIGUEZ, EDUARDO	Name	RODRIGUEZ, MALIEVI	
Address	5411 SHADY PINE STREET S.	Address	5411 SHADY PINE STREET S.	
City-State-Zip:	JACKSONVILLE FL 32244	City-State-Zip:	JACKSONVILLE FL 32244	

MGR

05/01/2021

FILED May 01, 2021 Secretary of State 1178431060CC

Certificate of Status Desired: No

Date