

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000124712

Entity Name: ACFN OF FORT LAUDERDALE, LLC

Current Principal Place of Business:

934 N. UNIVERSITY DR.
285
CORAL SPRINGS, FL 33071

Current Mailing Address:

934 N. UNIVERSITY DR.
285
CORAL SPRINGS, FL 33071

FEI Number: 46-1110117

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCorp SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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 MGR
Name MOCERI, SHANNON M
Address 934 N. UNIVERSITY DR. # 285
City-State-Zip: CORAL SPRINGS FL 33071

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: SHANNON MOCERI

MGR

02/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date