

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000006082

**Entity Name:** AMBER TIDES LLC

**Current Principal Place of Business:**

420 HAMDEN DR.  
CLEARWATER, FL 33767

**Current Mailing Address:**

C/O BIURO CT PTAK SA  
UL. ZEROMSKIEGO 6  
RZGOW, POLAND 95-030 PL

**FEI Number:** 90-0938474

**Certificate of Status Desired:** No

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

LAW OFFICES OF MICHAEL J. HEATH, PA  
167 108TH AVENUE  
TREASURE ISLAND, FL 33706 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 KOCIOLEK, MICHAL  
Address C/O BIURO CT PTAK SA  
UL. ZEROMSKIEGO 6  
City-State-Zip: RZGOW POLAND 95-030

*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:** MICHAL KOCIOLEK

**MANAGER**

**04/27/2017**

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

\_\_\_\_\_  
Date