

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000134624

Entity Name: AC SQUARED, LLC

Current Principal Place of Business:

1022 E. HERITAGE CLUB CIRCLE
DELRAY BEACH, FL 33483

Current Mailing Address:

1022 E. HERITAGE CLUB CIRCLE
DELRAY BEACH, FL 33483

FEI Number: 46-3728297

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABRAMS, JOY
1022 E. HERITAGE CLUB CIRCLE
DELRAY BEACH, FL 33483 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 ABRAMS, JOY L
Address 1022 E. HERITAGE CLUB CIRCLE
City-State-Zip: DELRAY BEACH FL 33483

Title MGR
Name ABRAMS, ROBERT G
Address 1022 E. HERITAGE CLUB CIRCLE
City-State-Zip: DELRAY BEACH FL 33483

Title MGR
Name COHEN, STEPHEN D
Address 617 ELDORADO LANE
City-State-Zip: DELRAY BEACH FL 33444

Title MGR
Name ABRAMS, DANA M
Address 617 ELDORADO LANE
City-State-Zip: DELRAY BEACH FL 33444

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: JOY ABRAMS

MGR

01/08/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date