

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000161513

Entity Name: ALL CASH OFFER LLC

Current Principal Place of Business:

19410 NW 5TH ST
PEMBROKE PINES, FL 33029-3246

Current Mailing Address:

19410 NW 5TH ST
PEMBROKE PINES, FL 33029-3246 US

FEI Number: 46-4125493

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COHEN, DANIEL
19410 NW 5TH ST
PEMBROKE PINES, FL 33029-3246 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 COHEN, SUSANA
Address 19410 NW 5TH ST
City-State-Zip: PEMBROKE PINES FL 33029-3246

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: SUSANA COHEN

MGRM

01/19/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date