### 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000168572

Entity Name: SPECIAL NEEDS ACCESS POINT, LLC

### Current Principal Place of Business:

151 N. NOB HILL ROAD SUITE 336 PLANTATION, FL 33322

# **Current Mailing Address:**

151 N. NOB HILL ROAD SUITE 336 PLANTATION, FL 33322 US

# FEI Number: NOT APPLICABLE

### Name and Address of Current Registered Agent:

TOLLEY, RACHEL L 2525 PONCE DE LEON BLVD 300 CORAL GABLES, FL 33134 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

#### Authorized Person(s) Detail :

Title	MGRM
Name	ALLMAN CAPITAL SOLUTIONS FAMILY LLLP
Address	151 N. NOB HILL ROAD STE 336
City-State-Zip:	PLANTATION FL 33322

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.

GP

SIGNATURE: CHRISTINA ALLMAN

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Feb 25, 2014 Secretary of State CC3955292685

Certificate of Status Desired: No

Date

02/25/2014 Date