

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000169209

**Entity Name:** AVG FULFILLMENT GROUP, LLC

**Current Principal Place of Business:**

9429 HARDING AVENUE  
305  
SURFSIDE, FL 33154

**Current Mailing Address:**

9429 HARDING AVENUE  
305  
SURFSIDE, FL 33154 US

**FEI Number:** 46-4249198

**Certificate of Status Desired:** No

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

ELLIOT, GAVIN T  
12995 BISCAYNE BLVD  
207  
NORTH MIAMI, FL 33181 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:** GAVIN T ELLIOT

06/01/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER  
Name ELLIOT, GAVIN  
Address 9429 HARDING AVENUE  
305  
City-State-Zip: SURFSIDE FL 33154

*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:** GAVIN TUDOR ELLIOT

MEMBER

06/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date