

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000077397

**Entity Name:** AACM WHOLESALE OF OVIEDO, LLC

**Current Principal Place of Business:**

800 WESTWOOD SQ  
SUITE F  
OVIEDO, FL 32765

**Current Mailing Address:**

800 WESTWOOD SQ  
SUITE F  
OVIEDO, FL 32765 US

**FEI Number:** 46-5652191

**Certificate of Status Desired:** No

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

VINTI, ANTHONY J  
800 WESTWOOD SQ  
SUITE F  
OVIEDO, FL 32765 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	Title	MGR
Name	VINTI, JENNIFER D	Name	VINTI, ANTHONY J
Address	800 WESTWOOD SQ SUITE F	Address	800 WESTWOOD SQ SUITE F
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	OVIEDO FL 32765

*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:** ANTHONY VINTI

MGR

04/27/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date