

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000083211

**Entity Name:** HANDYMAX LLC

**Current Principal Place of Business:**

6825 NW 169 ST UNIT H  
HIALEAH , FL 33015

**Current Mailing Address:**

6825 NW 169 ST UNIT H  
HIALEAH , FL 33015 US

**FEI Number:** 47-1284619

**Certificate of Status Desired:** No

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

ESCALANTE, LUIS G  
6825 NW 169 ST UNIT H  
HIALEAH , FL 33015 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 ESCALANTE, LUIS G  
Address 6825 NW 169 ST UNIT H  
City-State-Zip: HIALEAH FL 33015

*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:** LUIS G ESCALANTE

MNG

01/19/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date