

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000106332

**Entity Name:** KIXXS4U, LLC

**Current Principal Place of Business:**

34954 S.W. 188TH PLACE  
LOT 100  
HOMESTEAD, FL 33034

**Current Mailing Address:**

34954 S.W. 188TH PLACE  
LOT 100  
HOMESTEAD, FL 33034

**FEI Number:** 47-1268803

**Certificate of Status Desired:** No

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

WADE, CHERRON  
34954 S.W. 188TH PLACE  
LOT 100  
HOMESTEAD, FL 33034 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            WADE, CHERRON  
Address        34954 S.W. 188TH PLACE, LOT 100  
City-State-Zip: HOMESTEAD FL 33034

Title            AMBR  
Name            MAYERS, DOUGLAS  
Address        34954 S.W. 188TH PLACE, LOT 100  
City-State-Zip: HOMESTEAD FL 33034

*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:** CHERRON WADE

**MGR**

**04/10/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date