

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000153809

Entity Name: ANKOL, LLC

Current Principal Place of Business:

8908 CANDY PALM RD
KISSIMMEE, FL 34747

Current Mailing Address:

2295 S. HIAWASSEE ROAD
SUITE 407C
ORLANDO, FL 32835 US

FEI Number: 38-3941442

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TAX ACCOUNTING & FINANCIAL SPECIALISTS LLC
2295 S HIAWASSEE RD SUITE 407F
ORLANDO, FL 32835 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 KOLANIAN, ANAHID
Address 8908 CANDY PALM RD
City-State-Zip: KISSIMMEE FL 34747

Title MGR
Name ROSIQUE, ADRIANA KOLANIAN
Address 8908 CANDY PALM RD
City-State-Zip: KISSIMMEE FL 34747

Title MGR
Name CHISTE FIETTA, CRISTINA KOLANIAN
Address 8908 CANDY PALM RD
City-State-Zip: KISSIMMEE FL 34747

Title MGR
Name PASQUINI, PATRICIA KOLANIAN
Address 8908 CANDY PALM RD
City-State-Zip: KISSIMMEE FL 34747

Title MGR
Name PEREIRA DA SILVA, SIMONE KOLANIAN
Address 8908 CANDY PALM RD
City-State-Zip: KISSIMMEE FL 34747

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: KOLANIAN , ANAHID

MGR

01/23/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date