

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000191287

Entity Name: MAXELEMENT LLC

Current Principal Place of Business:

17500 N BAY RD
404
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

17500 N BAY RD
404
SUNNY ISLES BEACH, FL 33160 US

FEI Number: 36-4799703

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAMASH, VICTOR
17500 N BAY RD
404
SUNNY ISLES BEACH, FL 33160 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 MGRM
Name LAMASH, VICTOR
Address 17500 N BAY RD
404
City-State-Zip: SUNNY ISLES BEACH FL 33160

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: VICTOR LAMASH

MGRM

02/26/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date