

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000056114

**Entity Name:** AKARLAR NOTARY SIGNING L.L.C.

**Current Principal Place of Business:**

1152 NW 2ND STREET  
MIAMI, FL 33128

**Current Mailing Address:**

P.O. BOX 12985  
MIAMI, FL 33101 US

**FEI Number:** 47-3580660

**Certificate of Status Desired:** No

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

LACAYO, KARLA N  
1152 NW 2ND STREET  
MIAMI, FL 33128 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 LACAYO, KARLA N  
Address 1152 NW 2ND STREET  
City-State-Zip: MIAMI FL 33128

*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:** KARLA N. LACAYO

**MANAGER**

**04/28/2017**

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

\_\_\_\_\_  
Date