

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000154193

**Entity Name:** AMKIN KB LLC

**Current Principal Place of Business:**

1450 BRICKELL AVE  
SUITE 1450  
MIAMI, FL 33131

**Current Mailing Address:**

1450 BRICKELL AVE  
SUITE 1450  
MIAMI, FL 33131 US

**FEI Number:** 47-5070401

**Certificate of Status Desired:** No

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

EPSA OF AMERICA CORP.  
1450 BRICKELL AVE  
SUITE 1450  
MIAMI, FL 33131 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            AMBR  
Name            EPSA OF AMERICA CORP.  
Address        1450 BRICKELL AVE, SUITE 1450  
City-State-Zip: MIAMI FL 33131

*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:** RAMON LLORENS

**MANAGING DIRECTOR**

**04/27/2016**

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

\_\_\_\_\_  
Date