

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000056434

Entity Name: AXELKYM LLC**Current Principal Place of Business:**3901 S OCEAN DR
UNIT # C16U
HOLLYWOOD, FL 33019**Current Mailing Address:**1109 ALEXANDER BEND
WESTON, FL 33326**FEI Number:** 81-1930236**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARGENTAX LLC
1241 CANARY ISLAND DR
WESTON, FL 33327 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:** GABRIELA SETRAKIAN

04/30/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|-----------------------------|
| Title | MGR |
| Name | RAMIREZ, ALICIA |
| Address | 1109 ALEXANDER BEND |
| City-State-Zip: | WESTON FL 33326 |
| Title | MGRM |
| Name | CANELLA BERNAL, SAALBNDRA E |
| Address | 20801 BISCAYNE BLVD 403 |
| City-State-Zip: | AVENTURA FL 33180 |

| | |
|-----------------|----------------------------|
| Title | MGRM |
| Name | LAGE SEARA, DANIEL |
| Address | 20801 BISCAYNE BLVD 403 |
| City-State-Zip: | AVENTURA FL 33180 |
| Title | MGRM |
| Name | ALBARRACIN CANELLA, AXEL A |
| Address | 20801 BISCAYNE BLVD 403 |
| City-State-Zip: | AVENTURA FL 33180 |

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: ALICIA RAMIREZ

MGR

04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date