

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000065426

Entity Name: SWIPE AMS, LLC

Current Principal Place of Business:

330 SW 2ND STREET #105
FORT LAUDERDALE, FL 33312

Current Mailing Address:

330 SW 2ND STREET #105
FORT LAUDERDALE, FL 33312 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RANA, MOHAMMAD
330 SW 2ND STREET #105
FORT LAUDERDALE, FL 33312 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 RANA, MOHAMMAD
Address 330 SW 2ND STREET #105
City-State-Zip: FORT LAUDERDALE FL 33312

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: MOHAMMAD RANA

MGR

05/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date