

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000231191

**Entity Name:** ACTS ADVISORS, LLC

**Current Principal Place of Business:**

3315 MUD LAKE ROAD  
PLANT CITY, FL 33566

**Current Mailing Address:**

PO BOX 4595  
PLANT CITY, FL 33563 US

**FEI Number:** 35-2583091

**Certificate of Status Desired:** No

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

A238 PARTNERS, LLC  
3315 MUD LAKE ROAD  
PLANT CITY, FL 33566 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 A238 PARTNERS, LLC  
Address 3315 MUD LAKE ROAD  
City-State-Zip: PLANT CITY FL 33566

Title MGR  
Name GALLIMORE, SCOTT  
Address 3315 MUD LAKE ROAD  
City-State-Zip: PLANT CITY FL 33566

*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:** SCOTT GALLIMORE

MGR

06/14/2019

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

\_\_\_\_\_  
Date