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.

MANAGER

SIGNATURE: KARL ALTERMAN

Electronic Signature of Signing Authorized Person(s) Detail

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000019675

Entity Name: KA AND ASSOCIATES CONSULTING, LLC

Current Principal Place of Business:

235 NW 6TH ST. BOCA RATON, FL 33234

Current Mailing Address:

235 NW 6TH ST. BOCA RATON, FL 33234

FEI Number: 81-5122510

Name and Address of Current Registered Agent:

SCHNER, LARRY E 6111 BROKEN SOUND PARKWAY SUITE 200 BOCA RATON, FL 33487 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

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	ALTERMAN, KARL	Name	ALTERMAN, KARL
Address	235 NW 6TH ST	Address	235 NW 6TH ST
City-State-Zip:	BOCA RATON FL 33432	City-State-Zip:	BOCA RATON FL 33432

FILED Mar 07, 2018 Secretary of State CC7008197038

Date

Certificate of Status Desired: No

03/07/2018 Date