

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000236022

**Entity Name:** KCLASS ACT SOLUTIONS, LLC

**Current Principal Place of Business:**

1900 S. HARBOR CITY BLVD.  
301  
MELBOURNE, FL 32901

**Current Mailing Address:**

1900 S. HARBOR CITY BLVD.  
301  
MELBOURNE, FL 32901 US

**FEI Number:** 82-3472368

**Certificate of Status Desired:** No

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

KRUEL, ROBBIN  
1900 S. HARBOR CITY BLVD.  
301  
MELBOURNE, FL 32901 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:** ROBBIN KRUEL

04/30/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name KRUEL, ROBBIN  
Address 1900 S. HARBOR CITY BLVD., STE.  
301  
City-State-Zip: MELBOURNE FL 32901

Title AMBR  
Name KRUEL, KURT  
Address 1900 S. HARBOR CITY BLVD., STE.  
301  
City-State-Zip: MELBOURNE FL 32901

Title AMBR  
Name PELTIER, TRACY  
Address 1900 S. HARBOR CITY BLVD., STE.  
301  
City-State-Zip: MELBOURNE FL 32901

*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:** ROBBIN KRUEL

**PRESIDENT**

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date