

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000164296

**Entity Name:** AK ACS LLC

**Current Principal Place of Business:**

PMB 163  
6511 NOVA DR  
DAVIE, FL 33317

**Current Mailing Address:**

PMB 163  
6511 NOVA DR  
DAVIE, FL 33317 US

**FEI Number:** 30-1203174

**Certificate of Status Desired:** No

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

INTERAMERICAN CORPORATE SERVICES LLC  
2525 PONCE DE LEON BLVD STE 1225  
CORAL GABLES, FL 33134 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 LOEWEN, ALBERT  
Address MILE 25 SOUTHERN HWY STANN  
CREEK DISTRICT  
City-State-Zip: BELIZE C.A. AL

*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:** ALBERT LOEWEN

**MANAGER**

**02/12/2024**

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

\_\_\_\_\_  
Date