

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000080140

Entity Name: ALLIMAX GROUP, LLC

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

936 NORTH OLD DIXIE HIGHWAY  
JUPITER, FL 33458 US

**New Principal Place of Business:**

**Current Mailing Address:**

936 NORTH OLD DIXIE HIGHWAY  
JUPITER, FL 33458 US

**New Mailing Address:**

212 US HIGHWAY 1, SUITE 18  
TEQUESTA, FL 33469 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MURRAY, KATHARINE  
135 LIGHTHOUSE DRIVE  
TEQUESTA, FL 33469 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MURRAY, BRENT  
Address: 135 LIGHTHOUSE DRIVE  
City-St-Zip: TEQUESTA, FL 33469 US

Title: MGRM  
Name: MURRAY, KATHARINE  
Address: 135 LIGHTHOUSE DRIVE  
City-St-Zip: TEQUESTA, FL 33469 US

Title: MGRM  
Name: MURRAY, MAXWELL  
Address: 135 LIGHTHOUSE DRIVE  
City-St-Zip: TEQUESTA, FL 33469

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: KATHARINE MURRAY

MGRM

04/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date