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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: AK REPORTING LLC Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Kimberly 6 Hacker Name of Person					
AK Reporting LLC Firm/Company					
3850 OAKS Club House Dr. Apt 305					
Pomprino Bch, FL 33069 City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Kimberly HACKER at (954) 918-2403 Name of Person Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:					

\$25 Filing Fee

INHS18 (2/14)

(P) 2 of 2)

□ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

PiOritau.	11/0				
1. Nan	ne of the limited liability company:AKREPOR	ting LLC			
2. (a) _	3850 OAKS Clubhouse Dr.#3050	385000pcClubby	use Dr#3		
Now	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability of (Note: MAY BE POST OFFICE)			
poli	pompano Bch FL 33069	POMPANO BOX	1 1		
		prince our	110000 1		
			1		
	4-02-15	L150000703	49		
3.	Date of filing/registration in Florida 4.	Document number	1		
5. (a)	Kimberly G. Hacker				
	Registered Agent and Registered Office shown on the records of the Florida D	الأنها والأنها والأنها والمنافقة			
سسيب	Registered Office Address MUST BE FLORIDA STREET ADDRESS) Light House Point FL 3306	12_ Fa 7			
ád.	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	三	e		
1d(6)	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Light House Point FL 3306	<u>4</u>	4		
100	FI	i i i i i i i i i i i i i i i i i i i			
			<u>.</u>		
(b) _	Kimberly G. HACKET				
Enter name of NEW Registered Agent and/or NEW Registered Office address:					
7000	3850 OAKS CLUBhous	e Dr. #305			
1	NEW Registered Office Address:				
713	pompano Bch, FL 33	5069			
	,				
	, FL				
If the lin	mited liability company is not organized under the laws of the S	tate of Florida, it is hereby confirmed to	hat after		
the char	nge or changes are made, the Florida street address of the registe ill be identical. Or, in the case of a Florida limited liability com	ered office and the business office of th	e registered		
was/we	re authorized by an affirmative vote of the members of the limit	ed liability company or as otherwise pro	ovided in		
the artic	eles of organization or the operating agreement of the limited lia	- 17 1 · / 11	0 1/00		
Signature of a member or authorized representative of a member Printed or typed name of signee					
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the					
provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been					
to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.					
<u> </u>	K roeno takon				
TRANSPORT	c of Registered Agent		ı		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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FILING FEE: \$25.00

VHS18 (2/14)