

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000015981

**Entity Name:** SUMMIT ASSET PROTECTION GROUP, LLC

**Current Principal Place of Business:**

800 N MAGNOLIA AVE  
#105  
ORLANDO, FL 32803

**Current Mailing Address:**

1402 GREEN COVE ROAD  
WINTER PARK, FL 32789

**FEI Number: 59-3687107**

**Certificate of Status Desired: No**

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

KNYE-LEVIN, SWANTJE  
1402 GREEN COVE RD  
WINTER PARK, FL 32789 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 LEVIN, MITCHELL L  
Address 800 N MAGNOLIA AVE  
#105  
City-State-Zip: ORLANDO FL 32803

*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: MITCHELL LEVIN** \_\_\_\_\_

**MGR**

**01/17/2016**

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date