

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000053950

**Entity Name:** AMDM LLC

**Current Principal Place of Business:**

3653 REGENT BOULEVARD, SUITE 401  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

3653 REGENT BOULEVARD, SUITE 401  
JACKSONVILLE, FL 32224

**FEI Number:** 20-5103142

**Certificate of Status Desired:** No

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

TULLIS, GARY BESQ  
8709 HUNTERS CREEK DR. SOUTH  
JACKSONVILLE, FL 32256 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	Title	MGR
Name	SYPNIEWSKI, DAVID	Name	SYPNIEWSKI, MARIANNE
Address	3653 REGENT BOULEVARD, SUITE 401	Address	3653 REGENT BOULEVARD, SUITE 401
City-State-Zip:	JACKSONVILLE FL 32224	City-State-Zip:	JACKSONVILLE FL 32224

*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:** DAVID SYPNIEWSKI

**PRESIDENT**

**01/10/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date