

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000113088

**Entity Name:** AMIKAD, L.L.C.

**Current Principal Place of Business:**

10497 TOWN & COUNTRY WAY  
SUITE 820  
HOUSTON, TX 77024

**Current Mailing Address:**

10497 TOWN & COUNTRY WAY  
SUITE 820  
HOUSTON, TX 77024 US

**FEI Number:** 83-0500441

**Certificate of Status Desired:** No

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

A.G.C. CO.  
200 S. ORANGE AVENUE  
SUITE 2300  
ORLANDO, FL 32801 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 MGRM  
Name SCHOENFELD DE NIZRI, RENEE  
Address 10497 TOWN & COUNTRY WAY, STE.  
820  
City-State-Zip: HOUSTON TX 77024

*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:** SCHOENFELD DE NIZRI, RENEE

**MANAGER**

**01/12/2015**

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

\_\_\_\_\_  
Date