

**2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L09000083049

**Entity Name:** IMUNEEK, LLC

**Current Principal Place of Business:**

16141 SW 7TH ST  
PEMBROKE PINES, FL 33027

**Current Mailing Address:**

7777 DAVIE RD EXT  
HOLLYWOOD, FL 33024 US

**FEI Number:** 27-0947904

**Certificate of Status Desired:** No

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

ARBITMAN, MICHAEL A  
16141 SW 7TH ST  
PEMBROKE PINES, FL 33027 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 ARBITMAN, MICHAEL A  
Address 16141 SW 7TH ST  
City-State-Zip: PEMBROKE PINES FL 33027

Title CEO  
Name NELSON, LIXON  
Address 9450 ATLANTIC S  
City-State-Zip: MIRAMAR FL 33025

Title PRESIDENT  
Name NELSON, LIXON  
Address 9450 ATLANTIC STREET  
City-State-Zip: MIRAMAR FL 33025

*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:** LIXON NELSON

CEO

05/29/2016

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

\_\_\_\_\_  
Date