

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000061618

**Entity Name:** STRONGARM MERCHANDISING, LLC

**Current Principal Place of Business:**

6424 FOREST CITY RD.  
ORLANDO, FL 32810

**Current Mailing Address:**

6424 FOREST CITY RD.  
ORLANDO, FL 32810 US

**FEI Number: 27-2810117**

**Certificate of Status Desired: No**

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

DUBROW DUKER & ASSOCIATES, P.A.  
5401 N. UNIVERSITY DRIVE  
SUITE 204  
CORAL SPRINGS, FL 33067 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 MCKINNON, JEREMIAH WADE  
Address 6424 FOREST CITY RD.  
City-State-Zip: ORLANDO FL 32810

Title MGRM  
Name WOODARD, JOSHUA  
Address 6424 FOREST CITY RD.  
City-State-Zip: ORLANDO FL 32810

Title MGRM  
Name AKT & IWDT, INC.  
Address 6424 FOREST CITY RD.  
City-State-Zip: ORLANDO FL 32810

*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: ALEX TCHEKMEIAN**

**PRESIDENT**

**02/26/2014**

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

\_\_\_\_\_  
Date