

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000030432

Entity Name: AXTREME LLC

Current Principal Place of Business:

737 SW 109TH AVENUE
SUITE 100
MIAMI, FL 33174

Current Mailing Address:

8632 NW 196 TER
HIALEAH, FL 33015 US

FEI Number: 47-3174889

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, ARIEL SR
8632 NW 196 TER
HIALEAH, FL 33015 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	LOPEZ, ARIEL	Name	SILVA, YARELI
Address	8632 NW 196 TER	Address	737 SW 109TH AVENUE SUITE 100
City-State-Zip:	HIALEAH FL 33015	City-State-Zip:	MIAMI FL 33174

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: ARIEL LOPEZ

MANAGER

06/25/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date