

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000035294

Entity Name: KJOELEN SECURITY, LLC

Current Principal Place of Business:

4000 GRANDE VISTA #106
ST. AUGUSTINE, FL 32084

Current Mailing Address:

4000 GRANDE VISTA #106
ST. AUGUSTINE, FL 32084 US

FEI Number: 47-3475406

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KJOELEN, ARVE
4000 GRANDE VISTA #106
ST. AUGUSTINE, FL 32084 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 KJOELEN, ARVE
Address 4000 GRANDE VISTA #106
City-State-Zip: ST. AUGUSTINE FL 32084

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: ARVE KJOELEN

MANAGER

02/17/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date