

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000164999

Entity Name: AME FAMILY LLC

Current Principal Place of Business:

3030 N. ROCKY POINT DR. STE 150A
TAMPA, FL 33607

Current Mailing Address:

3030 N. ROCKY POINT DR. STE 150A
TAMPA, FL 33607

FEI Number: 35-2572102

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORTHWEST REGISTERED AGENT, LLC.
3030 N. ROCKY POINT DR. STE 150A
TAMPA, FL 33607 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 MANAGER
Name HAZAN, TALI
Address 2600 E. HALLANDALE BEACH BLVD.
 1001
City-State-Zip: HALLANDALE FL 33009

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: TALI HAZAN

MANAGER

04/27/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date