

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000135459

**Entity Name:** ACTIVATE ACCOUNTING LLC

**Current Principal Place of Business:**

44 SOUTHWIND DR  
BELLEAIR BLUFFS, FL 33770

**Current Mailing Address:**

44 SOUTHWIND DR  
BELLEAIR BLUFFS, FL 33770 US

**FEI Number:** 82-2022456

**Certificate of Status Desired:** No

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

DEMARCO, ANTOINETTE  
44 SOUTHWIND DR  
BELLEAIR BLUFFS, FL 33770 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            AMBR  
Name            DEMARCO, ANTOINETTE  
Address        44 SOUTHWIND DR  
City-State-Zip: BELLEAIR BLUFFS FL 33770

*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:** ANTOINETTE DEMARCO

**PRESIDENT**

**01/17/2020**

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

\_\_\_\_\_ Date