

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000175149

**Entity Name:** BIXME LLC

**Current Principal Place of Business:**

13170 ATLANTIC BLVD  
STE 26  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

13170 ATLANTIC BLVD  
STE 26  
JACKSONVILLE, FL 32225 US

**FEI Number:** 61-1772637

**Certificate of Status Desired:** No

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

BEZKROVNYI, MAKSYM  
13170 ATLANTIC BLVD  
STE 26  
JACKSONVILLE, FL 32225 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            BEZKROVNYI, MAKSYM  
Address        13170 ATLANTIC BLVD  
                  STE 26  
City-State-Zip: JACKSONVILLE FL 32225

*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:** MAKSYM BEZKROVNYI

AMBR

04/11/2017

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

\_\_\_\_\_  
Date