

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000005258

**Entity Name:** COMSYSTEMS, L.L.C.

**Current Principal Place of Business:**

3888 MANNIX DR  
#318  
NAPLES, FL 34114

**Current Mailing Address:**

1410 MARIPOSA CIR #105  
NAPLES, FL 34105

**FEI Number:** 65-1005920

**Certificate of Status Desired:** Yes

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

GANDOLFO, ANTOINE  
1410 MARIPOSA CIR  
#105  
NAPLES, FL 34105 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 GANDOLFO, ANTOINE  
Address 1410 MARIPOSA CIR #105  
City-State-Zip: NAPLES FL 34105

Title MGRM  
Name GANDOLFO, PROVIDENCE  
Address 1410 MARIPOSA CIR #105  
City-State-Zip: NAPLES FL 34105

*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:** PROVIDENCE GANDOLFO

**MGRM**

**03/06/2016**

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

\_\_\_\_\_  
Date