

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093626

Entity Name: SETPOINT AUTOMATION, LLC

Current Principal Place of Business:

4180 10TH AVE SE
NAPLES, FL 34117

FILED
Apr 16, 2016
Secretary of State
CC8265836448

Current Mailing Address:

13260 IMMOKALEE ROAD
SUITE 672
NAPLES, FL 34120 US

FEI Number: 20-4826836

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GAFFORD, STEVEN A
4180 10TH AVE SE
NAPLES, FL 34117 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	Title	AUTHORIZED MEMBER
Name	GAFFORD, STEVEN A	Name	GAFFORD, STETSON S
Address	4180 10TH AVE SE	Address	4180 10TH AVE SE
City-State-Zip:	NAPLES FL 34117	City-State-Zip:	NAPLES FL 34117

Title AUTHORIZED MEMBER
 Name GAFFORD, ROBIN CODDINGTON
 Address 4180 10TH AVE SE
 City-State-Zip: NAPLES FL 34117

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: STEVEN A. GAFFORD

MANAGING MEMBER

04/16/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date