# 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000030835

Entity Name: KLOPPER SOFTWARE CONSULTING, LLC

#### **Current Principal Place of Business:**

8856 LA TERRAZZA PL JACKSONVILLE, FL 32217

# **Current Mailing Address:**

8856 LA TERRAZZA PL JACKSONVILLE, FL 32217 US

# FEI Number: 20-4568957

# Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

# Authorized Person(s) Detail :

Title	PRESIDENT	Title	MGR
Name	KLOPPER, JOHNNY F	Name	KLOPPER, ALDA M
Address	8856 LA TERRAZZA PL	Address	8856 LA TERRAZZA PL
City-State-Zip:	JACKSONVILLE FL 32217	City-State-Zip:	JACKSONVILLE FL 32217

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: ALDA KLOPPER

MGR

03/04/2015 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 04, 2015 Secretary of State CC6454907596

Date

Certificate of Status Desired: No