### 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000039363

**Entity Name: GULFSTREAM SYSTEM SOLUTIONS LLC** 

**FILED** Apr 20, 2021 **Secretary of State** 3341495480CC

# **Current Principal Place of Business:**

830-13 A1A NORTH #501

PONTE VEDRA BEACH. FL 32082

# **Current Mailing Address:**

P. O. BOX 9916

CHESAPEAKE, VA 23321 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

JONES, TERI MICHELLE ESQ 830-13 A1A NORTH #501 PONTE VEDRA BEACH, FL 32082 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:

AUTHORIZED MEMBER, MANAGER Title

Name GRAHAM, ROBERT Address P. O. BOX 9916

City-State-Zip: CHESAPEAKE VA 23321

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.

**MGRM** 

Electronic Signature of Signing Authorized Person(s) Detail

04/20/2021