

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000045983

**FILED  
Feb 01, 2016  
Secretary of State  
CC8773049718**

**Entity Name:** AUTOMATED MOBILE TECHNOLOGIES LLC

**Current Principal Place of Business:**

13794 NW 4TH ST  
SUITE 205  
SUNRISE, FL 33325

**Current Mailing Address:**

13794 NW 4TH ST  
SUITE 205  
SUNRISE, FL 33325 US

**FEI Number:** 45-2278575

**Certificate of Status Desired:** No

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

GULEC, GOKHAN  
13794 NW 4TH ST  
SUITE 205  
SUNRISE, FL 33325 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 GULEC, GOKHAN  
Address 13794 NW 4TH ST  
SUITE 205  
City-State-Zip: SUNRISE FL 33325

Title MGRM  
Name ESEN, SELIM  
Address 13794 NW 4TH ST  
SUITE 205  
City-State-Zip: SUNRISE FL 33325

*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:** GOKHAN GULEC

**PARTNER**

**02/01/2016**

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

\_\_\_\_\_  
Date