

2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L12000025555

Entity Name: ARCHIPELAGEAR LLC

Current Principal Place of Business:

12205 RIDGE CROSSING WAY
JACKSONVILLE, FL 32226

Current Mailing Address:

12205 RIDGE CROSSING WAY
JACKSONVILLE, FL 32226 US

FEI Number: 45-4631947

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. .
3030 N. ROCKY POINT DR
STE 150A
TAMPA, FL 33607 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: BILL HAVRE

03/08/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT
Name PENA, RAFAEL A
Address 12205 RIDGE CROSSING WAY
City-State-Zip: JACKSONVILLE FL 32226

Title VP
Name WEAVER , RYAN
Address 3329 FOXCROFT CIRCLE
City-State-Zip: OVIEDO FL 32765

Title CFO
Name HETHERINGTON , KEVIN
Address 117 FERN CT
City-State-Zip: DELRAY BEACH FL 33444

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: RAFAEL A PENA

PRESIDENT

03/08/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date