

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000026088

**Entity Name:** DROPSWITCH LLC

**Current Principal Place of Business:**

5500 MILITARY TRAIL, SUITE 22-306  
JUPITER, FL 33458

**Current Mailing Address:**

5500 MILITARY TRAIL, SUITE 22-306  
JUPITER, FL 33458

**FEI Number:** 45-4706341

**Certificate of Status Desired:** No

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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 MGR  
Name WILKINSON, MATTHEW  
Address 5500 MILITARY TRAIL, SUITE 22-306  
City-State-Zip: JUPITER FL 33458

Title MGR  
Name WILKINSON, MICHAELA  
Address 5500 MILITARY TRAIL, SUITE 22-306  
City-State-Zip: JUPITER FL 33458

Title S  
Name WILKINSON, MICHAELA  
Address 5500 MILITARY TRAIL, SUITE 22-306  
City-State-Zip: JUPITER FL 33458

Title T  
Name WILKINSON, MATTHEW  
Address 5500 MILITARY TRAIL, SUITE 22-306  
City-State-Zip: JUPITER FL 33458

*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:** MATTHEW WILKINSON

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04/16/2014

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

\_\_\_\_\_  
Date