## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000073593

Entity Name: WIN SYSTEMS, LLC

**Current Principal Place of Business:** 

6863 SATINLEAF ROAD SOUTH #102

NAPLES, FL 34109

**Current Mailing Address:** 

6863 SATINLEAF ROAD SOUTH #102 NAPLES, FL 34109

FEI Number: 45-5424905 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

IRIGOYEN, ROXANE 6863 SATINLEAF ROAD SOUTH #102 NAPLES, FL 34109 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

**FILED** Jan 20, 2015

**Secretary of State** 

CC9477389334

Authorized Person(s) Detail:

Title MGRM Title MGR

WIN/SYSTEMS Name Name IRGOYEN, ROXANE

2 RTE DE GRUISSAN Address 6863 SATINLEAF ROAD SOUTH #102 Address

ESPACE SOLEIL BAT D NAPLES FL 34109

City-State-Zip: City-State-Zip: NARBONNE 11100

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: IRIGOYEN ROXANE

**MGR** 

01/20/2015