

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000085944

**Entity Name:** FLYCOM LLC**Current Principal Place of Business:**5301 N FEDERAL HWY  
SUITE 380 OFFICE 28  
BOCA RATON, FL 33487**Current Mailing Address:**5301 N FEDERAL HWY  
SUITE 380 OFFICE 28  
BOCA RATON, FL 33487 US**FEI Number:** 37-1702931**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SAN ANDRES, RAUL  
520 LOCK RD  
27  
DEERFIELD BEACH, FL 33442 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 AUTHORIZED MEMBER, MANAGER,  
TREASURER

Name SAN ANDRES, RAUL

Address 520 LOCK RD  
27

City-State-Zip: DEERFIELD BEACH FL 33442

Title AUTHORIZED MEMBER, VP

Name MOBILEPAY LLC

Address 8230 CORAL WAY

City-State-Zip: MIAMI FL 33155

Title AUTHORIZED MEMBER

Name VENTURA CAPITAL MARKET  
INVESTMENTS INC

Address CALLE 50, EDIFICIO CREDICORP  
BANK  
PISO 27, OFC. 2701

City-State-Zip: PANAMA

Title AUTHORIZED MEMBER

Name SALAME, FELIX SR.

Address AV LAS LOMAS 302 Y CALLE  
PRIMERA

City-State-Zip: GUAYAQUIL GUAYAS

Title AUTHORIZED MEMBER, SECRETARY,  
MANAGER

Name ARNOT, LYLE

Address 5301 N FEDERAL HWY  
SUITE 380 OFFICE 28

City-State-Zip: BOCA RATON FL 33487

Title AUTHORIZED MEMBER

Name ORTEGA, CARLOS E

Address PUNTA PACIFICA CALLE ISAAC  
HANONO MISSRI  
EDIFICIO MYSTIC POINT TORRE 200  
DPTO 21-A

City-State-Zip: PANAMA

Title AUTHORIZED MEMBER

Name SANTOS, JOSEPH

Address 1244 S MILITARY TRAIL  
APT. #723

City-State-Zip: DEERFIELD BEACH FL 33442

Title AUTHORIZED MEMBER

Name NUNEZ, GUSTAVO V SR.

Address CDLA PUERTO AZUL MZ C "3" VILLA 1

City-State-Zip: GUAYAQUIL GUAYAS

*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:** RAUL SAN ANDRESAUTHORIZED MEMBER,  
MANAGER, TREASURER

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date