## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000129640

Entity Name: FIDUS PARALOGISTICS LLC

**Current Principal Place of Business:** 

3613 NW 52 TERRACE GAINESVILLE. FL 32606

**Current Mailing Address:** 

3613 NW 52 TERRACE GAINESVILLE, FL 32606

FEI Number: 47-1641338 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAKS COURT SUITE A TAMPA, FL 33612 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 May 01, 2016

**Secretary of State** 

CC3186315477

Authorized Person(s) Detail:

Title AMBR Title AMBR

NameMADAMBA, JOHN-JOHNNameMAGALLONES, RODBRENAddress3613 NW 52 TERRACEAddress3613 NW 52 TERRACECity-State-Zip:GAINESVILLE FL 32606City-State-Zip:GAINESVILLE FL 32606

Title AMBR

Name CALANZA, CRIS

Address 3613 NW 52 TERRACE
City-State-Zip: GAINESVILLE FL 32606

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: MADAMBA, JOHN-JOHN

Electronic Signature of Signing Authorized Person(s) Detail

**PRESIDENT** 

05/01/2016