

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000150437

**Entity Name:** SMARTSITE FLORIDA, LLC

**Current Principal Place of Business:**

2441 INDIAN TRAILS W  
PALM HARBOR, FL 34683

**Current Mailing Address:**

PO BOX 26841  
TAMPA, FL 33623 US

**FEI Number:** 32-0455785

**Certificate of Status Desired:** No

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

LYNN, JAMES B JR.  
2441 INDIAN TRAILS W  
PALM HARBOR, FL 34683 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 LYNN, JAMES B JR.  
Address PO BOX 26841  
City-State-Zip: TAMPA FL 33623

Title MGR  
Name SMARTSITE LLC  
Address 41E INDUSTRIAL PARK DRIVE  
City-State-Zip: WALDORF MD 20602

*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:** JAMES LYNN

**MGR**

**04/08/2015**

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

\_\_\_\_\_  
Date