## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000095603

Entity Name: GETPASS LLC

**Current Principal Place of Business:** 

207 WEST PARK AVE

SUITE B

TALLAHASSEE, FL 32301

**Current Mailing Address:** 

207 WEST PARK AVE SUITE B

TALLAHASSEE, FL 32301 US

FEI Number: 47-4352320 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARD, SHIRLEY & RUDOLPH, P.A. 207 WEST PARK AVE. SUITE B TALLAHASSEE, FL 32301 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** Apr 29, 2016

**Secretary of State** 

CC2832454826

## Authorized Person(s) Detail:

Title MGR

YUSUFOV, VITALY Name

LOMONOSOVSKY AVENUE 15 APT Address

City-State-Zip: MOSCOW 119311 RUSSIA

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.

04/29/2016 SIGNATURE: VITALY YUSUFOV **MANAGER** 

Electronic Signature of Signing Authorized Person(s) Detail

Date