

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000115308

**Entity Name:** AUSTERE PROTECTION LLC

**Current Principal Place of Business:**

780 NE RETFORD AVENUE  
HILLSBORO, OR 97124

**Current Mailing Address:**

780 NE RETFORD AVENUE  
HILLSBORO, OR 97124 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

VILLELA & SHILTS LLC  
777 BRICKELL AVE STE 500  
MIAMI, FL 33131 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:** WALTER VILLELA CPA

05/01/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name RILEY, RICK  
Address 780 NE RETFORD AVENUE  
City-State-Zip: HILLSBORO OR 97124

*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:** RICK RILEY

MGR

05/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date