

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000163581

**Entity Name:** ELECTRONIC FORMS LLC

**Current Principal Place of Business:**

90 ALTON RD  
SUITE 804  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

90 ALTON RD  
SUITE 804  
MIAMI BEACH, FL 33139 US

**FEI Number:** 81-2010667

**Certificate of Status Desired:** No

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

GENDRON, JOSEPH  
90 ALTON RD  
SUITE 804  
MIAMI BEACH, FL 33139 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 P  
Name GENDRON, JOSEPH  
Address 90 ALTON RD SUITE 804  
City-State-Zip: MIAMI BEACH FL 33139

Title VP  
Name GENDRON, CHARLES  
Address 90 ALTON RD SUITE 804  
City-State-Zip: MIAMI BEACH FL 33139

Title VP  
Name SUDOLSKY, MARTIN  
Address 90 ALTON RD SUITE 804  
City-State-Zip: MIAMI BEACH FL 33139

*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:** JOSEPH GENDRON

**PRESIDENT**

**05/02/2016**

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

\_\_\_\_\_  
Date