

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000173192

Entity Name: P.S.I. SPHERICAL, LLC

Current Principal Place of Business:

167 LA MESA DR
ST. AUGUSTINE, FL 32095

Current Mailing Address:

P.O. BOX 2614
BOONE, NC 28607

FEI Number: 81-5258442

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WRIGHT FIRM
323 ANASTASIA BLVD.
ST. AUGUSTINE, FL 32080 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	Title	AUTHORIZED REPRESENTATIVE
Name	PETERSILIE, NATALIE B	Name	WARD, RENAE J
Address	P.O. BOX 2614	Address	P.O. BOX 1342
City-State-Zip:	BOONE NC 28607	City-State-Zip:	BOONE NC 28607

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: RENAE WARD

REPRESENATIVE

01/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date