## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000244059

**Entity Name: COPIMAKE LLC** 

**Current Principal Place of Business:** 

13234 INKWOOD CT

BOCA RATON, FL 33498

**Current Mailing Address:** 

13234 INKWOOD CT

BOCA RATON, FL 33498 US

FEI Number: 82-3552604 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

**ELIPSIS LLC** 13234 INKWOOD CT BOCA RATON, FL 33498 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.

Title

**AMBR** 

SIGNATURE:

Electronic Signature of Registered Agent

Date

**FILED** Jan 28, 2019

**Secretary of State** 

5895078490CC

Authorized Person(s) Detail:

Title **AMBR** 

BONIN, PIERRE Name BONIN, CORINE Name

13234 INKWOOD CT Address 13234 INKWOOD CT Address

City-State-Zip: BOCA RATON FL 33498 BOCA RATON FL 33498 City-State-Zip:

Title MGR

**ELIPSIS LLC** Name

Address 13234 INKWOOD CT

BOCA RATON FL 33498 City-State-Zip:

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.

01/28/2019 SIGNATURE: PIERRE BONIN **MEMBER**