

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000260849

**Entity Name:** SELESTEL LLC

**Current Principal Place of Business:**

800 WAUKEGAN RD.  
STE. #205  
GLENVIEW, IL 60025

**Current Mailing Address:**

800 WAUKEGAN RD.  
STE. #205  
GLENVIEW, IL 60025 US

**FEI Number:** 83-3150310

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC.  
7901 4TH STREET N,  
SUITE 300  
ST.PETERSBURG, FL 33702 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  
Name PAPPAS, JAMES W  
Address 800 WAUKEGAN RD. STE. #205  
City-State-Zip: GLENVIEW IL 60025

*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:** JAMES PAPPAS

**MANAGER**

**04/01/2019**

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

\_\_\_\_\_  
Date