

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000245731

**Entity Name:** AUTOMATION INTEGRATION CONTROLS LLC

**Current Principal Place of Business:**

4966 NW 104TH WAY  
CORAL SPRINGS, FL 33076

**Current Mailing Address:**

4966 NW 104TH WAY  
CORAL SPRINGS, FL 33076

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

ZAINEA, DACIAN  
4966 NW 104TH WAY  
CORAL SPRINGS, FL 33076 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 ZAINEA, DACIAN  
Address 4966 NW 104TH WAY  
City-State-Zip: CORAL SPRINGS FL 33076

Title MGR  
Name MAN, ADA  
Address 4966 NW 104TH WAY  
City-State-Zip: CORAL SPRINGS FL 33076

*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: ADA MAN** \_\_\_\_\_

**MANAGER**

**01/30/2023**

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date