

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000001725

Entity Name: ABB/CON-CISE OPTICAL GROUP LLC**Current Principal Place of Business:**12301 N.W. 39TH STREET
CORAL SPRINGS, FL 33065**Current Mailing Address:**12301 N.W. 39TH STREET
CORAL SPRINGS, FL 33065**FEI Number:** 51-0626564**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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 MEMBER
Name JOHANSSON, LARS
Address 12301 N.W. 39TH STREET
City-State-Zip: CORAL SPRINGS FL 33065

Title MEMBER
Name LORI, MAT
Address 12301 N.W. 39TH STREET
City-State-Zip: CORAL SPRINGS FL 33065

Title MEMBER
Name BENJAMIN, LARRY
Address 12301 N.W. 39TH STREET
City-State-Zip: CORAL SPRINGS FL 33065

Title MEMBER
Name JACKSON , LAWRENCE
Address 12301 N.W. 39TH STREET
City-State-Zip: CORAL SPRINGS FL 33065

Title MEMBER
Name WEINBRUM, BRAD
Address 12301 N.W. 39TH STREET
City-State-Zip: CORAL SPRINGS FL 33065

Title MEMBER
Name BURKE , THOMAS
Address 12301 N.W. 39TH STREET
City-State-Zip: CORAL SPRINGS FL 33065

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: BURKE , THOMASANGELA MARTIN,
ATTORNEY-IN-FACT

01/15/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date