

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000006929

Entity Name: JESKELL SYSTEMS, LLC**Current Principal Place of Business:**6201 CHEVY CHASE DR.
LAUREL, MD 20707**Current Mailing Address:**6201 CHEVY CHASE DR.
LAUREL, MD 20707 US**FEI Number:** 27-3553035**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE:4
TALLAHASSEE, FL 32301 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 | MGRM |
| Name | GLEICH, BILL |
| Address | 6201 CHEVY CHASE DR. |
| City-State-Zip: | LAUREL MD 20707 |
| Title | MBR |
| Name | P. DOUGLAS GERST MYER |
| Address | 6201 CHEVY CHASE DR. |
| City-State-Zip: | LAUREL MD 20707 |

| | |
|-----------------|----------------------|
| Title | MBR |
| Name | SOULE, CARSON |
| Address | 6201 CHEVY CHASE DR. |
| City-State-Zip: | LAUREL MD 20707 |
| Title | AP |
| Name | MARSH, HEATHER |
| Address | 6201 CHEVY CHASE DR. |
| City-State-Zip: | LAUREL MD 20707 |

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: HEATHER MARSH

HR SPECIALIST

02/10/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date