

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000058185

**Entity Name:** ARMADA LABS LLC

**Current Principal Place of Business:**

4500 EXECUTIVE DR.  
STE 210  
NAPLES, FL 34119

**FILED**  
**May 03, 2013**  
**Secretary of State**  
**CC1973482070**

**Current Mailing Address:**

4500 EXECUTIVE DR.  
STE 210  
NAPLES, FL 34119

**FEI Number:** 20-2329958

**Certificate of Status Desired:** No

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

MIKALAI, VARNITSKI M  
4500 EXECUTIVE DR.  
STE 210  
NAPLES, FL 34119 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            MIKALAI, VARNITSKI M  
Address        4500 EXECUTIVE DR. STE 210  
City-State-Zip: NAPLES FL 34119

Title            MGRM  
Name            YAUHENI, PRATASENIA  
Address        15183 SUMMIT PLACE CIR  
City-State-Zip: NAPLES FL 34119

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MIKALAI VARNITSKI

**MGRM**

**05/03/2013**

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

\_\_\_\_\_  
Date