## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000043361

Entity Name: COPASETIC MECHANICAL, LLC

**Current Principal Place of Business:** 

21225 SW 183 AVE MIAMI, FL 33187

**Current Mailing Address:** 

21225 SW 183 AVE MIAMI, FL 33187

FEI Number: 27-2437827 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONLEY, GLENN J 21225 SW 183 AVE MIAMI, FL 33187 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

FILED Jan 03, 2017

**Secretary of State** 

CC8597786150

Authorized Person(s) Detail:

Title MANAGER Title PRESIDENT

 Name
 CONLEY, GLENN J
 Name
 CONLEY, ADRIANA

 Address
 21225 SW 183 AVE
 Address
 21225 SW 183 AVE

 City-State-Zip:
 MIAMI FL 33187
 City-State-Zip:
 MIAMI FL 33187

Title VP

Name CONLEY, RYAN KEVIN Address 21225 SW 183 AVE City-State-Zip: MIAMI FL 33187

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: ADRIANA CONLEY

**PRESIDENT** 

01/03/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date