

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000086385

Entity Name: PERSONAL PROTECTION DEVICES, LLC

Current Principal Place of Business:

4703 LAKEMONT CT.
PALM BEACH GARDENS, FL 33403

Current Mailing Address:

4703 LAKEMONT CT.
PALM BEACH GARDENS, FL 33403 US

FEI Number: 45-5008080

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SATRIANO, LOUIS
4703 LAKEMONT CT.
PALM BEACH GARDENS, FL 33403 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 SATRIANO, LOUIS
Address 4703 LAKEMONT CT.
City-State-Zip: PALM BEACH GARDENS FL 33403

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: LOUIS SATRIANO

MGRM

04/27/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date