### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000060146

**Entity Name: IGT GRAPHICS LLC** 

Feb 02, 2015 **Secretary of State** CC3816125976

**FILED** 

## **Current Principal Place of Business:**

11320 FORTUNE CIRCLE STE G7

WELLINGTON, FL 33414

## **Current Mailing Address:**

11320 FORTUNE CIRCLE STE G7 WELLINGTON, FL 33414 US

FEI Number: 45-2686799 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

BUENO, TOMAS 15710 CHANDELLE PLACE WELLINGTON, FL 33414 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** Title **MGRM** 

**BUENO, TOMAS** Name Name BUENO, MARLA G

15710 CANDELLE PLACE 15710 CHANDELLE PLACE Address Address City-State-Zip: WELLINGTON FL 33414 City-State-Zip: WELLINGTON FL 33414

Title **MGRM** Title **MGRM** 

OROZCO, JUAN C Name TVEDTEN, LISA Name

11710 PARADISE COVE LANE Address 11710 PARADISE COVE LANE Address City-State-Zip: WELLINGTON FL 33449 City-State-Zip: WELLINGTON FL 33449

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.