

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000096354

Entity Name: NORTH AMERICA WIRELINE LLC

Current Principal Place of Business:

1776 FULLER DR
GULF BREEZE, FL 32563

Current Mailing Address:

1776 FULLER DR
GULF BREEZE, FL 32563

FEI Number: 45-0674729

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OWENS, MICHAEL R
1776 FULLER DR
GULF BREEZE, FL 32563 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 MGR
Name MICHAEL, OWENS R
Address 1776 FULLER DR
City-State-Zip: GULF BREEZE FL 32563

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: MICHAEL OWENS

OWNER

04/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date