

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000124680

**Entity Name:** KIPU SYSTEMS LLC

**Current Principal Place of Business:**

444 BRICKELL AVENUE  
SUITE 850  
MIAMI, FL 33131

**FILED**  
**Mar 19, 2014**  
**Secretary of State**  
**CC7339936344**

**Current Mailing Address:**

444 BRICKELL AVENUE  
SUITE 850  
MIAMI, FL 33131 US

**FEI Number:** 46-1098906

**Certificate of Status Desired:** No

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

FRANOSZEK, TOBIAS  
1446 LENOX AVE  
STE 1  
MIAMI BEACH, FL 33139 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 FRANOSZEK, TOBIAS  
Address 1446 LENOX AVE #1  
City-State-Zip: MIAMI BEACH FL 33139

Title MGR  
Name DUWIN, NATALIA  
Address 1446 LENOX AVE #1  
City-State-Zip: MIAMI BEACH FL 33139

*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:** TOBIAS FRANOSZEK

**MGR**

**03/19/2014**

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

\_\_\_\_\_  
Date