

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000058707

**Entity Name:** INVISIBLE SHIELD PARTNERS LLC

**Current Principal Place of Business:**

16264 APRICOT WAY  
DELRAY BEACH, FL 33484

**Current Mailing Address:**

16264 APRICOT WAY  
DELRAY BEACH, FL 33484 US

**FEI Number:** 46-2759571

**Certificate of Status Desired:** No

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

TAXPLACE  
1660 W HILLSBORO BLVD  
DEERFIELD BEACH, FL 33442 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 SILVA, ANTONIO T  
Address 16264 APRICOT WAY  
City-State-Zip: DELRAY BEACH FL 33484

Title MGRM  
Name DA SILVA JR, OSVALDO A  
Address 16264 APRICOT WAY  
City-State-Zip: DELRAY BEACH FL 33484

*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:** OSVALDO A DA SILVA JR

**MGR**

**05/01/2015**

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

\_\_\_\_\_  
Date