

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000055831

**FILED**  
**Feb 14, 2017**  
**Secretary of State**  
**CC4504212074**

**Entity Name:** SEISMATRIX EQUIPMENT, LLC

**Current Principal Place of Business:**

1747 SEMINOLE RD  
ATLANTIC BEACH, FL 32233

**Current Mailing Address:**

1747 SEMINOLE RD  
ATLANTIC BEACH, FL 32233 US

**FEI Number:** 46-5230573

**Certificate of Status Desired:** No

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

KIRK, CRISTINE  
1747 SEMINOLE RD  
ATLANTIC BEACH, FL 32233 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 KIRK, ADAM G  
Address 1747 SEMINOLE RD  
City-State-Zip: ATLANTIC BEACH FL 32233

Title AMBR  
Name ADAMS, JOSHUA  
Address 2451 WINCHESTER LANE  
City-State-Zip: ST AUGUSTINE FL 32092

Title AMBR  
Name DEGAUDENZI, PATTICIO  
Address 2901 CASTNET COURT  
City-State-Zip: ST AUGUSTINE FL 32092

*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:** ADAM KIRK

**PRESIDENT**

**02/14/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date