

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000054194

**Entity Name:** GFY SYSTEMS, LLC

**Current Principal Place of Business:**

3431 PINE RIDGE RD SUITE 101  
NAPLES, FL 34109

**Current Mailing Address:**

3431 PINE RIDGE RD SUITE 101  
NAPLES, FL 34109

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PARRISH, JON  
3431 PINE RIDGE RD SUITE 101  
NAPLES, FL 34109 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 LEACH, GREGORY  
Address 3431 PINE RIDGE RD SUITE 101  
City-State-Zip: NAPLES FL 34109

Title AMBR  
Name LEACH, GREGORY  
Address 3431 PINE RIDGE RD SUITE 101  
City-State-Zip: NAPLES FL 34109

Title MBR  
Name VANDERSLUIS, JEREMY  
Address 3431 PINE RIDGE RD SUITE 101  
City-State-Zip: NAPLES FL 34109

Title MBR  
Name PEYSINA, NATALIA  
Address 3431 PINE RIDGE RD SUITE 101  
City-State-Zip: NAPLES FL 34109

*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:** GREGORY LEACH

**MGR**

**04/18/2016**

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

\_\_\_\_\_  
Date