

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000256213

**Entity Name:** PERIPHERAL SYSTEMS, LLC

**Current Principal Place of Business:**

800 FAIRWAY DRIVE  
SUITE 495  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

800 FAIRWAY DRIVE  
SUITE 495  
DEERFIELD BEACH, FL 33441 US

**FEI Number:** 84-3704200

**Certificate of Status Desired:** No

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

FOCARACCI, RALPH  
800 FAIRWAY DRIVE  
SUITE 495  
DEERFIELD BEACH, FL 33441 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 BOHNES, DIRK  
Address 18175 WOODSIDE TRAIL  
City-State-Zip: JUPITER FL 33458

*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:** DIRK BOHNES

**MANAGING MEMBER**

**01/20/2022**

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

\_\_\_\_\_  
Date