# 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.

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

#### SIGNATURE: JOSHUA JENSEN

Electronic Signature of Signing Authorized Person(s) Detail

PHOENIX, AZ 85012

Entity Name: EMERALD AR SYSTEMS, LLC

**Current Principal Place of Business:** 

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

# **Current Mailing Address:**

3636 N CENTRAL AVE

STE 650

DOCUMENT# M1000001677

3636 N CENTRAL AVE STE 650 PHOENIX, AZ 85012 US

## FEI Number: 26-0548216

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

INCORP SERVICES, INC. 17888 67TH CT NORTH LOXAHATCHEE, FL 33470 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

#### Authorized Person(s) Detail :

, JONATHAN
N CENTRAL AVE - # 650
ENIX AZ 85012
PER, AUDREY
N CENTRAL AVE - # 650
ENIX AZ 85012

Certificate of Status Desired: No

FILED Mar 18, 2020 Secretary of State 2876131479CC

Date

Date

MEMBER

03/18/2020