## **2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000005799

Entity Name: MORPHO DETECTION, LLC

**Current Principal Place of Business:** 

7151 GATEWAY BLVD NEWARK, CA 94560

**Current Mailing Address:** 

7151 GATEWAY BLVD NEWARK, CA 94560 US

FEI Number: 94-3123544 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

MANAGER

IRVING TX 75063

**FILED** Jan 09, 2019

**Secretary of State** 

1077287868CC

Authorized Person(s) Detail :

Title MANAGER Title

BOMBA, KAREN Name Name EYINK, GREGORY Address 7151 GATEWAY BLVD 7151 GATEWAY BLVD Address City-State-Zip: NEWARK CA 94560 NEWARK CA 94560 City-State-Zip:

Title **MANAGER** Title MANAGER

Name STEPHENSON, MONICA MCGINLEY, ALLYN Name Address 7151 GATEWAY BLVD Address 7151 GATEWAY BLVD NEWARK CA 94560 City-State-Zip: City-State-Zip: NEWARK CA 94560

Title **MEMBER** Title MANAGER

Name SAFRAN USA, INC. Name GHODBANE, KARIM Address 2201 W ROYAL LANE 7151 GATEWAY BLVD Address

SUITE 150 NEWARK CA 94560 City-State-Zip:

City-State-Zip: Title **MEMBER** 

MORPHO USA Name

Address 2201 W ROYAL LANE

SUITE 150

City-State-Zip: IRVING TX 75063

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.

01/09/2019 SIGNATURE: ALLYN MCGINLEY MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

Date