

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 185642

**Entity Name:** STOFIN CO., INC.**Current Principal Place of Business:**ONE NORTH CLEMATIS ST  
SUITE 200  
WEST PALM BEACH, FL 33401**Current Mailing Address:**ONE NORTH CLEMATIS ST  
SUITE 200  
WEST PALM BEACH, FL 33401 US**FEI Number:** 59-0782336**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TABERNILLA, ARMANDO A  
ONE NORTH CLEMATIS ST  
SUITE 200  
WEST PALM BEACH, FL 33401 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

**Officer/Director Detail :****Title** DIRECTOR, SENIOR VICE PRESIDENT  
**Name** BLOMQVIST, ERIK J.  
**Address** ONE NORTH CLEMATIS ST SUITE 200**City-State-Zip:** WEST PALM BEACH FL 33401**Title** VICE PRESIDENT & CHIEF  
PROCUREMENT OFFICER  
**Name** RYAN, ALLAN A. IV  
**Address** ONE NORTH CLEMATIS ST SUITE 200**City-State-Zip:** WEST PALM BEACH FL 33401**Title** VICE PRESIDENT OF TAXATION  
**Name** ZUKOWSKI, PHILIP M.  
**Address** ONE NORTH CLEMATIS ST  
SUITE 200**City-State-Zip:** WEST PALM BEACH FL 33401**Title** VICE PRESIDENT AND CHIEF  
ACCOUNTANT OFFICER  
**Name** HENDI, MEHDI  
**Address** 1 NORTH CLEMATIS STRET  
SUITE 200**City-State-Zip:** WEST PALM BEACH FL 33401**Title** PRESIDENT  
**Name** FERNANDEZ, LUIS J.  
**Address** ONE NORTH CLEMATIS ST SUITE 200**City-State-Zip:** WEST PALM BEACH FL 33401**Title** DIRECTOR, VP, GENERAL COUNSEL  
& SECRETARY  
**Name** TABERNILLA, ARMANDO A.  
**Address** ONE NORTH CLEMATIS ST SUITE 200**City-State-Zip:** WEST PALM BEACH FL 33401**Title** VP, FINANCE & TREASURER  
**Name** LONDONO, ALEJANDRO  
**Address** ONE NORTH CLEMATIS ST  
SUITE 200**City-State-Zip:** WEST PALM BEACH FL 33401**Title** ASSISTANT SECRETARY  
**Name** SADLER, BENJAMIN  
**Address** 1 NORTH CLEMATIS STREET  
SUITE 200**City-State-Zip:** WEST PALM BEACH FL 33401

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ARMANDO TABERNILLA

VICE PRESIDENT

04/28/2022

Electronic Signature of Signing Officer/Director Detail

Date