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. PARTNER

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: IMRAN HASNANI

Electronic Signature of Signing Officer/Director Detail

Date

Certificate of Status Desired: No

Electronic Signature of Registered Agent

Officer/Director Detail :

SIGNATURE:

Title	P	Title	т
Name	AMAN, ANWAR	Name	AMAN, SARDAR
Address	384 DISTRIBUTION PKEY	Address	384 DISTRIBUTION PKWY
City-State-Zip:	COLLIERVILLE TN 38017	City-State-Zip:	COLLIERVILLE TN 38017
Title	VP	Title	SEC
Title Name	VP DEVJI, RAFIQ	Title Name	SEC HASNANI, IMRAN

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.

Name and Address of Current Registered Agent:

HASNANI, IMRAN 4151 COMMONS DR 5415 DESTIN, FL 32541 US

DESTIN, FL 32541

DOCUMENT# P13000095428

Entity Name: NWFL C STORE INC III

Current Principal Place of Business:

Current Mailing Address:

384 DISTRIBUTION PKWY

FEI Number: NOT APPLICABLE

COLLIERVILLE, TN 38017

4151 COMMONS DR 5415

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED Apr 02, 2024 Secretary of State 5198002243CC