

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000028940

Entity Name: WHITING EDGE SYSTEMS, LLC

Current Principal Place of Business:

3873 S.W. BRUNER TERRACE
PALM CITY, FL 34990

Current Mailing Address:

POST OFFICE BOX 1292
PALM CITY, FL 34991

FEI Number: 20-1022316

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EUGENE FRANK WHITING
3873 S.W. BRUNER TERRACE
PALM CITY, FL 34990 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 MGRM
Name EUGENE FRANK WHITING
Address POST OFFICE BOX 1292
City-State-Zip: PALM CITY FL 34991

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: EUGENE WHITING

MGRM

03/19/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date