

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064419

Entity Name: RELIABILITY LEADERSHIP INSTITUTE, LLC

Current Principal Place of Business:

BOX 425
BLAIR, NE 68008

Current Mailing Address:

PO BOX 425
BLAIR, NE 68008 US

FEI Number: 20-3073641

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GSK REGISTERED AGENTS, INC.
1380 ROYAL PALM SQUARE BLVD.
FT. MYERS, FL 33919 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: KEVIN A. KYLE

02/22/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name O'HANLON, TERRENCE
Address PO BOX 425
City-State-Zip: BLAIR NE 68008

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: TERRENCE O'HANLON

MANAGER

02/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date