

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000038521

**Entity Name:** NEW LINE TRANSPORT, LLC

**Current Principal Place of Business:**

1501 BELVEDERE ROAD  
WEST PALM BEACH, FL 33406

**Current Mailing Address:**

1501 BELVEDERE ROAD  
WEST PALM BEACH, FL 33406 US

**FEI Number:** 20-4810779

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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 PRES/DIRECTOR  
Name WILD, MATTHEW J  
Address 1501 BELVEDERE ROAD  
City-State-Zip: WEST PALM BEACH FL 33406

Title VP, SECRETARY, DIRECTOR  
Name EGAN, MIKE F  
Address 1501 BELVEDERE ROAD  
City-State-Zip: WEST PALM BEACH FL 33406

Title VP  
Name TURKETT, ROBERT L  
Address 1501 BELVEDERE ROAD  
City-State-Zip: WEST PALM BEACH FL 33406

Title ASST. SECRETARY  
Name GARCIA, EDUARDO  
Address 1501 BELVEDERE RD  
City-State-Zip: WEST PALM BEACH FL 33406

Title ASSISTANT GENERAL COUNSEL  
Name CARLSON, NATALIE J  
Address 1501 BELVEDERE RD  
City-State-Zip: WEST PALM BEACH FL 33406

*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:** EDUARDO GARCIA

**ASSISTANT SECRETARY:** 04/19/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date