

2024 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000059044

Entity Name: STATE TRUST ASSET RECOVERY, LLC

Current Principal Place of Business:

2505 NW 7TH RPAD
GAINESVILLE, FL 32607

Current Mailing Address:

PO BOX 357576
GAINESVILLE, FL 32635-7576 US

FEI Number: 20-4978604

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLEN, C. TOM
2505 NW 7TH ROAD
GAINESVILLE, FL 32607 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: C. TOM ALLEN

03/04/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title P
Name ALLEN, TOM C
Address PO BOX 357576
City-State-Zip: GAINESVILLE FL 32635

Title VP
Name ALLEN, MISTY M
Address PO BOX 357576
City-State-Zip: GAINESVILLE FL 32635

Title VP
Name ALLEN, JONATHAN D
Address PO BOX 357576
City-State-Zip: GAINESVILLE FL 32635

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: C. TOM ALLEN

PRESIDENT

03/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date