

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000051751

**Entity Name:** AQUAOX LLC

**Current Principal Place of Business:**

17355 HAMLIN BLVD  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

17355 HAMLIN BLVD  
LOXAHATCHEE, FL 33470 US

**FEI Number:** 90-0397810

**Certificate of Status Desired:** No

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

VAN SCHAIK, MICHEL  
17355 HAMLIN BLVD  
LOXAHATCHEE, FL 33470 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 AUTHORIZED MEMBER  
Name VAN SCHAIK, TERJE  
Address 17355 HAMLIN BLVD  
City-State-Zip: LOXAHATCHEE FL 33470

Title MANAGING MEMBER  
Name VAN SCHAIK, MICHEL  
Address 17355 HAMLIN BLVD  
City-State-Zip: LOXAHATCHEE FL 33470

*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:** MICHEL VAN SCHAIK

MANAGING MANAGER

01/19/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date