SIGNATURE	CRAIG BELL		
	Electronic Signature of Registered Agent		
Authorized Person(s) Detail :			
Title	MGRM	Title	MGR
Name	BELL, GRANT J	Name	ELLEY, LISA M
Address	444 SARATOGA AVE APT 10B	Address	444 SARATOGA AVE APT 10B
City-State-Zip:	SANTA CLARA CA 95050	City-State-Zip:	SANATA CLARA CA 95050

444 SARATOGA AVE APT 10B SANTA CLARA, CA 95050 US

FEI Number: 86-3847688

Name and Address of Current Registered Agent:

BELL, CRAIG 1751 EAST OAK KNOLL CIRCLE DAVIE, FL 33324 US

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: GRANT J BELL

MGRM

03/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 01, 2023 Secretary of State 8800918747CC

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000099198

Entity Name: PRODUCTWORKX LLC

Current Principal Place of Business:

1751 EAST OAK KNOLL CIRCLE DAVIE, FL 33324

Current Mailing Address:

Certificate of Status Desired: Yes

03/01/2023 Date

Date