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: JAMES TUCKER

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L09000114154

Entity Name: GUNNAR INDUSTRIES, LLC

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

205 LEISURE CIRCLE PORT ORANGE, FL 32127

Current Mailing Address:

205 LEISURE CIRCLE PORT ORANGE. FL 32127 US

FEI Number: 27-1402824

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

TUCKER, ANN 975 WENDAM CT PORT ORANGE, FL 32127 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:

Authorized Person(s) Detail :			
Title	CEO	Title	VP
Name	TUCKER, JAMES	Name	WILLIAMS, CHRISTINA LEE
Address	205 LEISURE CIRCLE	Address	205 LEISURE CIRCLE
City-State-Zip:	PORT ORANGE FL 32127	City-State-Zip:	PORT ORANGE FL 32127

FILED Apr 14, 2015 Secretary of State CC7401020834

Date

Certificate of Status Desired: No

04/14/2015

CEO