

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000141393

Entity Name: INVERSELOGIX LLC

Current Principal Place of Business:

4500 SALISBURY RD
SUITE # 180
JACKSONVILLE, FL 32216

Current Mailing Address:

4500 SALISBURY RD
SUITE # 180
JACKSONVILLE, FL 32216 US

FEI Number: 45-4058766

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MALLI, HEMANTH K
10343 CYPRESS LAKES DRIVE
JACKSONVILLE, FL 32256 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 MGR
Name MALLI, HEMANTH K
Address 10343 CYPRESS LAKES DRIVE
City-State-Zip: JACKSONVILLE FL 32256

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: HEMANTH MALLI

MANAGER

03/17/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date