

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000013275

Entity Name: GRUP HIBRID,LLC

Current Principal Place of Business:

550 N REO STREET, STE. 300
TAMPA, FL 33609

Current Mailing Address:

PO BOX 219-108
DUVALL, WA 98019 US

FEI Number: 46-1962319

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARTE, JULIE
HARTE & CO
9376 BALM RIVERVIEW ROAD
RIVERVIEW, FL 33569 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 MGRM
Name MILES, T.R.
Address PO BOX 219-108
City-State-Zip: DUVALL WA 98019

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: T. R. MILES

MGRM

05/15/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date