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: KELLY ELYNN	OWNER	01/28/2020	

Authorized Person(s) Detail ·

SIGNATURE: THOMAS FLYNN

Authorized Person(s) Detail :				
Title	MGRM	Title	MGRM	
Name	FLYNN, THOMAS W JR	Name	FLYNN, KELLY L	
Address	5101 SILVER LAKE DRIVE	Address	5101 SILVER LAKE DRIVE	
City-State-Zip:	PALATKA FL 32177	City-State-Zip:	PALATKA FL 32177	

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

FEI Number: 46-3802210

FLYNN, THOMAS W JR 1421 MADISON STREET PALATKA, FL 32177 US

SIGNATURE: KELLY FLYNN

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.

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000139302

Entity Name: 4 WHEEL SOLUTIONS LLC

Current Principal Place of Business:

1421 MADISON STREET PALATKA, FL 32177

Current Mailing Address:

1421 MADISON STREET PALATKA FL 32177

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 28, 2020 Secretary of State 5119157870CC

> 01/28/2020 Date

Certificate of Status Desired: No

Date