

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000162102

**Entity Name:** WARRIOR X GEAR LLC

**Current Principal Place of Business:**

10436 EASTPARK LAKE DRIVE  
ORLANDO, FL 32832

**Current Mailing Address:**

10436 EASTPARK LAKE DRIVE  
ORLANDO, FL 32832

**FEI Number:** 46-4142060

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PHILLIPS, SCOTT  
10436 EASTPARK LAKE DRIVE  
ORLANDO, FL 32832 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 PHILLIPS, SCOTT  
Address 10436 EASTPARK LAKE DRIVE  
City-State-Zip: ORLANDO FL 32832

*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:** SCOTT PHILLIPS

**OWNER**

**03/02/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date