

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000167194

**Entity Name:** VOLCAN 4X4, LLC

**Current Principal Place of Business:**

1810 W. KENNEDY BLVD  
TAMPA, FL 33606

**Current Mailing Address:**

404 MAXWELL PLACE  
INDIAN ROCKS BEACH, FL 33785 US

**FEI Number:** 46-4360819

**Certificate of Status Desired:** No

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

GUY, CHARLES H IV  
1810 W. KENNEDY BLVD  
TAMPA, FL 33606 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	Title	MGR
Name	GUY, JOHN N	Name	GUY, CHARLES H IV
Address	1810 W. KENNEDY BLVD	Address	1810 W. KENNEDY BLVD
City-State-Zip:	TAMPA FL 33606	City-State-Zip:	TAMPA FL 33606

*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:** CHARLES H. GUY IV

**MANAGER**

**05/25/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date