

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000059349

**Entity Name:** NITRO-CHEM AMERICAS, LLC

**Current Principal Place of Business:**

3301 BONITA BEACH RD.  
SUITE 209  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

3301 BONITA BEACH RD.  
SUITE 212  
BONITA SPRINGS, FL 34134

**FEI Number:** 46-5366966

**Certificate of Status Desired:** No

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

GREGORY, FILIPOWICZ  
1710 S. TARPON BAY DRIVE  
NAPLES, FL 34119 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 NITRO-CHEM  
Address UL. WOJSKA POLSKIEGO 65A  
City-State-Zip: 85-825 BYDGOSZCZ NIP PL554- PO  
03-10--422

Title AR  
Name PTASZYNSKI, TOMASZ  
Address UL. WOJSKA POLSKIEGO 65A  
City-State-Zip: 85-825 BYDGOSZCZ NIP PL554- PO  
03-10--422

Title AR  
Name FILIPOWICZ, GREGORY  
Address 1710 S. TARPON BAY DRIVE  
City-State-Zip: NAPLES FL 34119

Title AR  
Name SPENCER, SCOTT  
Address 1098 IRISHTOWN ROAD  
City-State-Zip: NORTH EAST MD 21901

*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:** GREGORY FILIPOWICZ

RA

03/01/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date