that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ERNESTO M. CALAS

Electronic Signature of Signing Authorized Person(s) Detail

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L14000107161

Entity Name: CALAS PERFORMANCE LLC

Current Principal Place of Business:

5771 DEWBERRY WAY WEST PALM BEACH. FL 33415

Current Mailing Address:

5771 DEWBERRY WAY WEST PALM BEACH. FL 33415

FEI Number: 47-1439578

Name and Address of Current Registered Agent:

CALAS, ERNESTO M 5771 DEWBERRY WAY WEST PALM BEACH, FL 33415 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

Authorized Person(s) Detail :

Title	MGR	Title	AUTHORIZED REPRESENTATIVE
Name	CALAS, ERNESTO M.	Name	CALAS, ASHLEY R
Address	5771 DEWBERRY WAY	Address	5771 DEWBERRY WAY
City-State-Zip:	WEST PALM BEACH FL 33415	City-State-Zip:	WEST PALM BEACH FL 33415

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

OWNER

04/27/2020

Date

FILED Apr 27, 2020 Secretary of State 0853193368CC

Certificate of Status Desired: Yes

Date